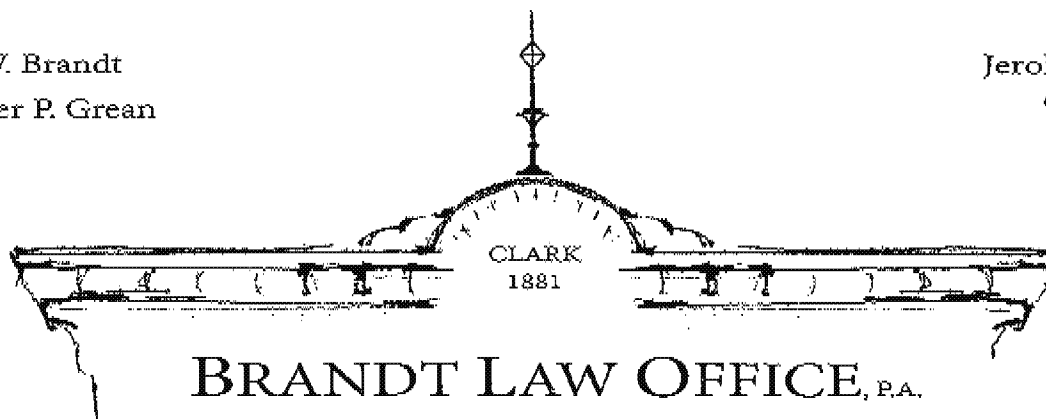


James W. Brandt
Christopher P. Grean

Jerold M. Lucas*
of Counsel



FAX TRANSMISSION SHEET

OUR FAX MACHINE NUMBER IS (507)931-6909

TO: Susan Strickler 267-256-4262

FROM: Verny Lucas

DATE: 10/10/2016

NUMBER OF PAGES INCLUDING THIS PAGE: 3

ADDITIONAL COMMENTS: Melissa McIntyre

ORIGINALS TO BE MAILED: YES X NO

*If transmission is not complete, please call 1-507-931-6940.

THANK YOU!

The information contained in this FAX transmittal is confidential. For that reason, it may be subject to the attorney-client privilege. Therefore, it is only for the use of the recipient named above. If you are not the intended recipient, or the employee or agent responsible for delivery of this information to the intended recipient, you are notified that this is not a waiver of any privilege, and the dissemination, distribution, or copying of this information is strictly prohibited. If this has been sent to you in error, please immediately notify the sender by telephone, and return the information to Brandt Law Office, P.A., 219 West Nassau, Box 57, St. Peter, Minnesota 56082.

219 W. Nassau, P.O. Box #57, St. Peter, MN 56082 • Ph: (507)-931-6940 Fx: (507)-931-6909

e.mail: info@brandtlawoffice.com

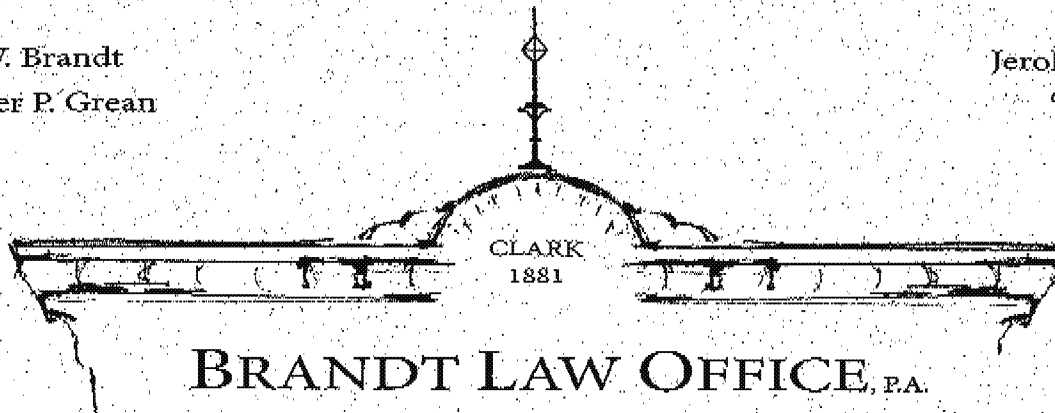
RSL001152

EXHIBIT 26F

* MSBA Board Certified Real Property Specialist

James W. Brandt
Christopher P. Grean

Jerold M. Lucas*
of Counsel



October 10, 2016

Susan Strickler, HCAFA
Senior Benefit Analyst
Quality Review Unit
Reliance Standard Life Insurance Company
P.O. Box 8330
Philadelphia, PA 19101-8330

DELIVERED VIA U.S. MAIL AND FACSIMILE – 267-256-4262

Re: Claimant: Melissa McIntyre
Policy No: LTD 121690
Claim No: 2011-09-27-0051-LTD-01
Policyholder: Immanuel St. Joseph's-Mayo Health System

Dear Ms. Strickler:

As you know, I represent Melissa McIntyre with reference to the above Long-Term Disability claim. I have just received a notice from MLS National Medical Evaluation Services involving an attempted scheduling for a medical evaluation of my client on Saturday, October 22, 2016, at 11:00 a.m., at Alexandria, Minnesota.

Please be advised that we object to this for the following reasons:

1. This attempted notification does not bear my correct office address and it did not provide sufficient time to arrange for such travel.
2. This evaluation has been scheduled in Alexandria, Minnesota, which is 3 hours one way distant from my client's home in Mankato. This distance is unreasonable and unnecessary especially in view of hundreds of doctors being available in the Twin City area or Rochester.

Susan Strickler, HCAFA
October 10, 2016

2

3. The proposed travel to Alexandria will cause too much pain, fatigue and discomfort to my client and will create an unsafe situation for her.
4. October 22, 2016, is a Saturday and it is unreasonable and inappropriate to schedule such an evaluation on a weekend.
5. My client is not available for that weekend since she has something else already scheduled.
6. Pursuant to the Group Long-Term Disability Insurance Program Handbook published by Immanuel-St. Joseph's Mayo Health System, we demand the following:

"Your Handbook provides that if an internal rule, guideline, protocol, or other similar criterion was relied upon in making the adverse determination, ... that a copy of such rule, guideline, protocol or other criterion will be provided free of charge to the claimant upon request."

We hereby demand a copy of such rule, guideline, or protocol.

7. Pursuant to page 5.0 of said Handbook, this dispute may be settled by arbitration in accordance with the Rules for Health and Accident claims of the American Arbitration Association.

Finally, let me remind you that this involves an appeal of a determination which was made by your firm more than 8 months ago, on February 5, 2016. Your delay in resolving this matter shows that you and your firm are not operating in good faith and in my opinion, will be subject to a claim for punitive damages.

Please refer to my prior letter dated May 31, 2016.

Sincerely yours,



Jerold M. Lucas

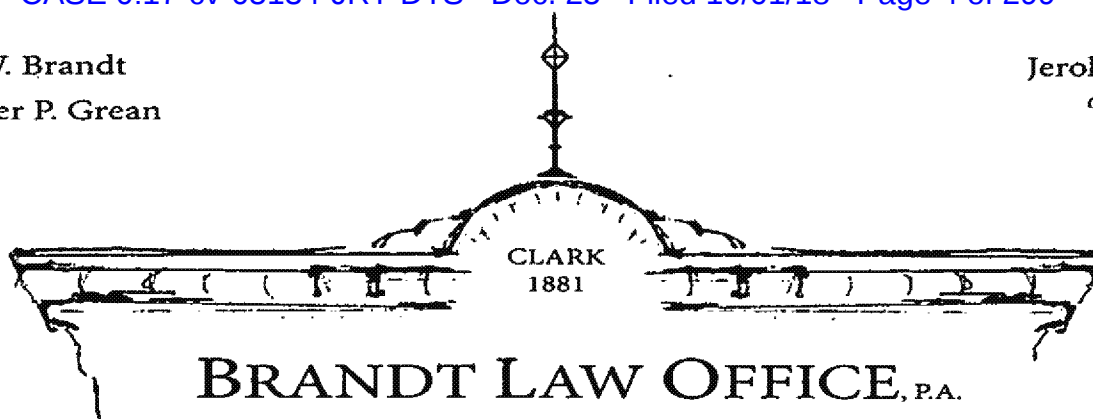
JML/amh

cc: Melissa McIntyre

RSL001154

James W. Brandt
Christopher P. Grean

Jerold M. Lucas*
of Counsel



October 10, 2016

Susan Strickler, HCAFA
Senior Benefit Analyst
Quality Review Unit
Reliance Standard Life Insurance Company
P.O. Box 8330
Philadelphia, PA 19101-8330

DELIVERED VIA U.S. MAIL AND FACSIMILE – 267-256-4262

Re: Claimant: Melissa McIntyre
Policy No: LTD 121690
Claim No: 2011-09-27-0051-LTD-01
Policyholder: Immanuel St. Joseph's-Mayo Health System

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Please be advised that we object to this for the following reasons:

1. This attempted notification does not bear my correct office address and it did not provide sufficient time to arrange for such travel.
2. This evaluation has been scheduled in Alexandria, Minnesota, which is 3 hours one way distant from my client's home in Mankato. This distance is unreasonable and unnecessary especially in view of hundreds of doctors being available in the Twin City area or Rochester.

Susan Strickler, HCAFA
October 10, 2016

2

3. The proposed travel to Alexandria will cause too much pain, fatigue and discomfort to my client and will create an unsafe situation for her.
4. October 22, 2016, is a Saturday and it is unreasonable and inappropriate to schedule such an evaluation on a weekend.
5. My client is not available for that weekend since she has something else already scheduled.
6. Pursuant to the Group Long-Term Disability Insurance Program Handbook published by Immanuel-St. Joseph's Mayo Health System, we demand the following:

"Your Handbook provides that if an internal rule, guideline, protocol, or other similar criterion was relied upon in making the adverse determination, ... that a copy of such rule, guideline, protocol or other criterion will be provided free of charge to the claimant upon request."

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Finally, let me remind you that this involves an appeal of a determination which was made by your firm more than 8 months ago, on February 5, 2016. Your delay in resolving this matter shows that you and your firm are not operating in good faith and in my opinion, will be subject to a claim for punitive damages.

Please refer to my prior letter dated May 31, 2016.

Sincerely yours,

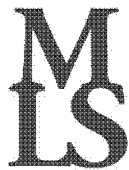


Jerold M. Lucas

JML/amh

cc: Melissa McIntyre

RSL001156



MLS Group of Companies, Inc.

MLS National Medical Evaluation Services

Phone: 888.657.4634 | Fax: 248.356.6757 | www.mls-ime.com

11/10/2016

MELISSA MCINTYRE
Brandt Law Offices
C/O Jerod Lucas, Esq.
219 W Nassau,
St. Peter, MN 56082

Re: Independent Medical Evaluation
Claim #: 2011-09-27-0051-LTD-01

Dear MELISSA MCINTYRE

Per the request of Reliance Standard Life Insurance, an independent medical evaluation has been scheduled with

DOCTOR: Khalafalla Bushara M.D.
Vilhauer PT- SharePoint Credit Union Building
200 E Travelers Trail, Suite 265
Burnsville, MN 55337
(952) 229-8500 For Directions Only

DATE: 12/03/2016 *Please note: This location is ONLY available on Saturday for appointments.

TIME: 2:30 PM

Please bring any diagnostic tests and x-rays with you to the examination.

If you are unable to attend please contact your claims representative at Reliance Standard Life Insurance upon receipt of this letter. Please do not contact the doctor's office. They will not be able to change your appointment.

If you need directions, call the number listed above. Failure to appear for the above scheduled examination could result in the billing of a no-show fee.

Sincerely,

Gretchen Lewis
MLS National Medical Evaluation Services

cc: Reliance Standard Life Insurance, Susan Strickler
File

RSL001157

Invoice 329872**Date of Invoice 10/24/2016****MLS Group of Companies, Inc.**

P.O. Box 492417

Redding CA 96049

248-945-9001 Fax: 248-356-6757

Reliance Standard Life Insurance - PA,
2 Commerce Square

Philadelphia, PA 19103

Attention: Susan Strickler

Case Id: 2011-09-27-0051-LTD-01

Referral Id: 22616002684

Name: MCINTYRE, MELISSA

Employer:

Physician: Khalafalla Bushara

Specialty: Neurology

Svc Date: 10/22/16

Item	Rate
LATE CANCEL	1,000.00

Invoice Total \$1,000.00

Receipt Total 0.00

Invoice Balance **\$1,000.00**

Please visit our new web-site address located at www.mls-ime.com

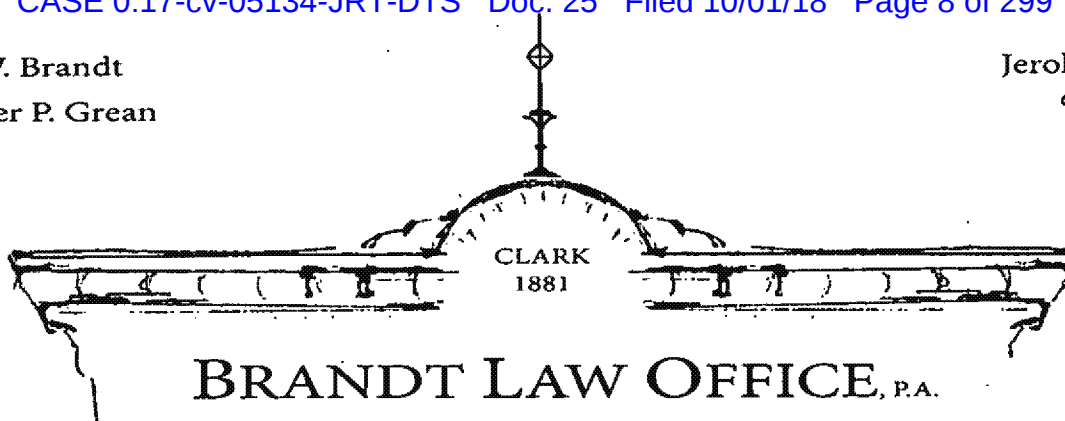
Thank you
MLS Tax ID #: 38-3341904

Please make checks payable to
MLS Group of Companies, Inc.

RS1001188

James W. Brandt
Christopher P. Grean

Jerold M. Lucas*
of Counsel



December 7, 2016

Susan Strickler, HCAFA
Senior Benefit Analyst
Quality Review Unit
Reliance Standard Life Insurance Company
P.O. Box 8330
Philadelphia, PA 19101-8330

Re: Claimant: Melissa McIntyre
Policy No: LTD 121690
Claim No: 2011-09-27-0051-LTD-01
Policyholder: Immanuel St. Joseph's-Mayo Health System

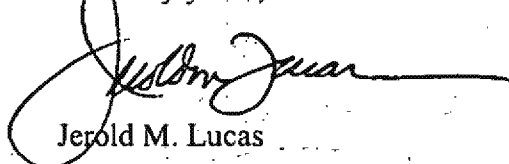
Dear Ms. Strickler:

My client, Melissa McIntyre, attended the Independent Medical Evaluation held on December 3, 2016. Please send me a copy of the doctor's report regarding said examination.

At this time, we request reimbursement to my client for the round trip mileage from her home to the appointment totaling 140 miles.

We, again, hereby demand that her long-term disability benefits be reinstated forthwith pursuant to ERISA 29 U.S.C. 1132(a)(1)B. Your company's delay in reinstating said benefits is totally unreasonable. I await your reply.

Sincerely yours,



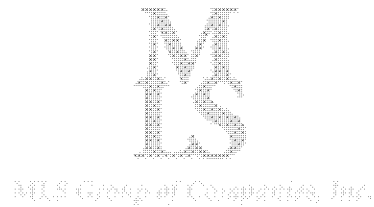
Jerold M. Lucas

JML/amh
cc: Melissa McIntyre

219 W. Nassau, P.O. Box #57, St. Peter, MN 56082 • Ph: (507)-931-6940 Fx: (507)-931-6909
e.mail: info@brandtlawoffice.com

* MSBA Board Certified Real Property Specialist

RSL001159



MLS National Medical Evaluation Services
Phone: 888.667.0004 | Fax: 248.754.0757 | www.mls-eval.com

December 16, 2016

MLS Group of Companies
29000 Inkster Road Suite 100
Southfield, MI 48034

RE: Melissa McIntyre

Date of Birth:	Redacted
Date of Loss:	07/20/2011
Date of IME:	12/03/2016
Claim Number:	22616002684
Case Number:	20010374

Dear Ms. Lewis:

Melissa McIntyre was seen for an independent medical examination on the December 3, 2016, in Burnsville, Minnesota.

HISTORY

Melissa McIntyre is a 46-year-old right-handed woman evaluated for work disability. Ms. McIntyre suffers from Charcot-Marie-Tooth syndrome (type II)(hereditary motor sensory neuropathy type II). She indicated she worked as a registered nurse and was hired in 2003. Her job involved working on the hospital floor as well as the emergency room with active patient care. She indicated around 2011, she had difficulty performing her job due to disabilities from Charcot-Marie-Tooth syndrome.

CURRENT SYMPTOMS

Currently, Ms. McIntyre complains of numbness, pain, tingling, and restlessness in the legs and feet. She had weakness of the feet and lower legs and uses AFOs bilaterally (she has been using AFOs since February 2016). She uses a walker to ambulate long distances and a cane to ambulate short distances. Ms. McIntyre also reports weakness

RSL001160

RE: Melissa McIntyre

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of the upper extremities with tendency to drop things, especially from the left hand. She also reports bladder symptoms, which she describes as difficulty in bladder emptying. She denies incontinence. Denies catheter use. She states that she used Flomax, which did not help. She reports fatigue, otherwise, denies other neurological symptoms.

PAST MEDICAL HISTORY

Significant for Charcot-Marie-Tooth syndrome. This seems to run autosomal dominant pattern and was diagnosed in her mother as well as grandmother on the mother's side. She has one brother and one sister. Her sister age 37, is not affected. Her brother died at age 19 from an accident. She reports that the symptoms in her mother started in late 50's. While in Ms. McIntyre, the symptoms started at around age 8 and had surgery at age 2 and age 4 for deformities of the feet. She had surgery for hammertoes in 2001 and had toe surgery at age 15 and 18. Two weeks prior to this evaluation, she had right foot surgery.

CURRENT MEDICATIONS

She currently uses tramadol, gabapentin, omeprazole, calcium and vitamin supplements.

ALLERGIES

She is allergic to Requip and Vicodin.

SOCIAL HISTORY

Ms. McIntyre indicated that she has not worked since 2011. She does not smoke, and does not drink alcohol. She is able to drive but tends to take naps when driving long distances. She is a registered nurse by training.

PHYSICAL EXAMINATION

Ms. McIntyre was accompanied by her parents. Her stated height was 5 feet 6-1/2 inches. Her stated weight was 158 pounds. Ms. McIntyre was cognitively intact. Short-term memory was normal. She could recall 3/3 objects after 5-minute delay without difficulty. She could perform serial subtractions test without difficulty. She could also copy an intersecting pentagon figure and draw a clock face without difficulty. Cranial

RSL001161

RE: Melissa McIntyre

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nerves examination was unremarkable. Visual fields were full to confrontation. Extraocular movements were full with no nystagmus or diplopia. Facial movement and sensation were intact and symmetrical. There was no facial asymmetry. The tongue and palate moved in midline. Upper extremity examination showed normal tone and muscle bulk. The power was 5/5 on the right side 5-/5 on the left side. Pinprick sensation was normally felt in the upper extremities. Two-point discrimination was less than 4 mm on the tips of all fingers. Tinel sign was negative at the wrists and elbows bilaterally. Lower extremity examination showed profound wasting in the legs and feet with toe flexion deformities and multiple scars from prior surgery. Calf circumference, 10 cm below the fibular head was 27 cm. Ms. McIntyre had a cast on the right side for recent surgery. Pinprick sensation was decreased up to knee level. Right lower extremity was not examined due to cast. Romberg sign was not tested.

REVIEW OF MEDICAL RECORDS

Surveillance report dated February 24, 2014. Surveillance report indicated surveillance on June 10, June 24, and June 25, 2015.

Mayo Clinic Health System records were reviewed from July 13, 2011, through July 6, 2011. July 13, 2011, note indicates an evaluation for complaints of fatigue. Past medical history was listed to include diagnosis of Charcot-Marie-Tooth, status post multiple surgeries to the feet as a child and jaw surgery as well as history of restless legs syndrome, treated with Neurontin. Past surgical history also included tonsillectomy and hemorrhoidectomy. Other complaints were chronic pain attributed to Charcot-Marie-Tooth. Reported that her work as a registered nurse was becoming increasingly difficult secondary to diagnosis of Charcot-Marie-Tooth syndrome. She reported persistent fatigue. Complete blood count and electrolytes were reported to be normal.

Occupation medicine evaluation on July 20, 2011, indicates an evaluation for difficulty with work due to Charcot-Marie-Tooth. Physical examination was reported to show Stork leg deformity, classic sign of Charcot-Marie-Tooth syndrome, inability to heel or toe walk, and inability to tandem gait without losing balance. Romberg sign was reported to be positive. There was no tenderness of paraspinal muscles. Strength of the upper extremities was 5-/5. Weakness of the lower extremities was also noted. Upper and lower extremity reflexes were described as 2/4 and symmetrical. Cranial nerves were intact. Cognitive testing was normal. She was released from work for seven days and to return to work thereafter with restrictions of avoiding patient lifting, transfers, and climbing ladders. Also given restrictions of lifting no more than 20 pounds. It was specifically stated that "she is interested in finding another position as

RE: Melissa McIntyre

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an R.N. that does not require her to do patient handling, which I support." She was advised to cut her position from full-time at 0.9 percent to 0.8.

Neurological consultation dated August 17, 2011, indicates an evaluation for a Charcot-Marie-Tooth syndrome. It was indicated that her mother as well as grandmother and great-grandmother from the mother's side were affected. Physical examination was reported. It was stated that Ms. McIntyre was born with club foot and had decreased tone in the lower extremities and had hammertoes and fused ankle joints. It was stated that she had two surgeries at age 2 to 4, started walking at age 2 to 3, and required braces. It was stated that in her 20s and early 30s, she was able to rock climb and Rollerblade; however, in mid 30s she started having more pain and more balance problems, and the year prior to evaluation noted marked impairment of balance. Also reported decreased dexterity of the upper extremities and dropping things. Also reported difficulty with texting, using a cellular phone. Medications listed to include tramadol, lorazepam, vitamin D, Prilosec, and Neurontin 300 mg in the morning and 600 mg at bedtime. Allergies were listed to include codeine and Requip. Physical examination reported to show bilateral drop feet, worse on the left compared to the right with 3- weakness of the right plantar flexion but 4- weakness on the left. It was indicated that there was no eversion or inversion. Noted 2- minus weakness of the intrinsic muscles of the hands bilaterally including the finger abductors, adductors, and extensor digitorum communis. Decreased sensation to pinprick up to the sock line to the knee with decreased vibration was also noted. Reflexes were reported to be hypoactive in the upper extremities but still present, normoactive at the knees, and absent on the right ankle but elicitable on the left. Cerebellar examination was unremarkable. Diagnosis of hereditary motor and sensory neuropathy (Charcot-Marie-Tooth). This was described as likely autosomal dominant consistent with Charcot-Marie-Tooth type 1A (demyelinating variant secondary to the PMP 22 gene duplication). EMG and nerve conduction studies were recommended. Genetic testing was also recommended. She was given vitamin supplements.

Endocrine consultation dated September 6, 2011, for complaints of fatigue listed diagnosis of hypersomnia, and sleep study was recommended.

She was seen again for neurological consultation on September 13, 2011. EMG was interpreted to show predominantly motor neuropathy with absent to low compound muscle action potentials involving the peroneal and tibial muscles bilaterally. Findings were interpreted to be consistent with hereditary motor and sensory neuropathy type II. Sensory nerve conduction studies were reported to be unremarkable. This was

RE: Melissa McIntyre

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reported to be against PMP 22 gene duplication. She was advised to continue calcium and vitamin supplements and Co Q10.

Sleep study but was performed on September 22, 2011. It was reported to show no evidence for obstructive sleep apnea. Other diagnosis listed was periodic leg movement of sleep and restless legs syndrome. Pulmonary evaluation/Sleep Clinic records listed diagnosis of daytime slight hyper somnolence without evidence of obstructive sleep apnea. Second diagnosis was restless legs syndrome.

She was seen at occupational medicine on October 12, 2011. She was released to work eight-hour days, 24 hours per week in primarily seated position. Advised to avoid lifting or patient transfers.

She was seen again on December 27, 2011. The note indicated that Ms. McIntyre was no longer employed.

The Mayo Clinic records indicates follow-up neurology, and she was referred to physical therapy.

Started physical therapy July 31, 2013.

Continued follow-up at occupational health clinic.

She was seen with urinary tract symptoms on October 14, 2014.

She was seen for neurological follow-up on July 29, 2015. She had bilateral foot-drop. She was evaluated by Dr. Vanessa Tseng.

A report from Dr. Tseng dated March 14, 2016 indicates that Ms. McIntyre suffers from Charcot-Marie-Tooth disorder, a condition that limits her ability to physically function and provided extreme fatigue. Also reported chronic pain and fatigue, difficulty with concentrating. The report indicated that the disorder is progressive. Dr. Tseng opined that Ms. McIntyre cannot engage in any gainful employment, even in sedentary position due to her limitations.

Orthopaedic & Fracture Clinic records indicate follow-up from June 9, 2015, through September 11, 2015. The records indicate evaluation of right finger injury following a dog bite. Laceration of the right middle finger.

RE: Melissa McIntyre

Page: 6

SUMMARY

The findings and the medical records reviewed are consistent with the diagnosis of Charcot-Marie-Tooth (hereditary motor sensory neuropathy type II) with profound weakness, sensory loss and wasting of the lower extremity muscles and loss of balance. In my opinion, Ms. McIntyre is capable of performing sedentary jobs (office work with no tasks that require balance). Charcot-Marie-Tooth is a progressive disorder with no available effective treatment. As the disease progresses, recommendations such as using a motorized wheelchair may be required.

ANSWERS TO SPECIFIC QUESTIONS

1. *Please address all medical conditions currently impacting claimant's status as of 1/8/16.*

As of January 18, 2016, medical condition affecting Ms. McIntyre is Charcot-Marie-Tooth syndrome with profound weakness and wasting and sensory loss in the lower extremities with loss of balance.

2. *Please document and discuss primary and secondary diagnoses as of 7/20/11*

As of July 20, 2011, the primary diagnosis was that of Charcot-Marie-Tooth type II syndrome and restless legs syndrome. Other diagnosis listed in the medical records was chronic pain.

3. *Based on your review, is there medical data to substantiate the presence of subjective complaints as of 1/18/16? If so, please list.*

Complaints of fatigue likely contributed to by the loss of balance, lower extremity weakness, and sensory loss as well as medications for restless legs syndrome (Neurontin). Based on the medical records reviewed as well as today's examination, there are medical data to substantiate the subjective complaints as of January 18, 2016. As stated earlier, Charcot-Marie-Tooth is a progressive syndrome with worsening of symptoms over time.

4. *Please comment on current treatment plan. Is it reasonable and appropriate? Do you have any other treatment recommendations?*

RE: Melissa McIntyre

Page: 7

The current treatment plan is that of conservative treatment with use of AFOs, medications for restless legs syndrome, and surgery if required to correct deformities. There are currently no specific treatments for Charcot-Marie-Tooth syndrome. In my opinion, the treatment up to date has been reasonable and appropriate. I do not have any other treatment recommendations.

5. *What is the prognosis in this case?*

The prognosis is guarded. This is a progressive syndrome that worsens over the years.

6. *Please provide a detailed explanation regarding presence or absence of impairment as of 1/18/16. Please include references to medical records included in your review. Report must include the basis for your opinion.*

Please see above.

7. *Please advise if the claimant has work capacity on a full time consistent basis as of 1/18/16. NOTE - Gradual return to work is not an option. Please include the basis for your opinion:*

- *Lack of work function at any level of exertion.*
- *Sedentary - Exerting up to 10 pounds of force occasionally and/or a negligible amount of force frequently to lift, carry, push, pull, or otherwise move objects, including the human body. Sedentary work involves sitting most of the time, but may involve walking or standing for brief periods of time. For example, sitting for up to 1 hour, standing/stretching and resume sitting. Jobs are sedentary if walking and standing are required only occasionally and all other sedentary criteria are met.*
- *Light: Exerting up to 20 pounds of force occasionally, and/or 10 pounds of force frequently (one-third to two-thirds of the time), and for a negligible amount of force constantly (two-thirds or more of the time) to move objects. Physical demand requirements are in excess of those for Sedentary Work. Even though the weight lifted may be only a negligible amount, a job should be ruled Light work when it requires walking or standing to a significant degree, sitting most of the time, but entails pushing and/or pulling of arms or leg controls, and/or working at a production rate pace entailing the constant pushing and/or pulling of material even though the weight of those materials is negligible.*

RE: Melissa McIntyre

Page: 8

- *Medium - Exerting 20 to 50 pounds of force occasionally, and/or 10 to 25 pounds of force frequently, and/or greater than negligible up to 10 pounds of force constantly to move objects. Physical Demand requirements are in excess of those for Light Work*

Definitions of frequency -

Occasionally - Activity or condition exists up to 1/3 of the workday

Frequently - Activity or condition exists from 1/3 to 2/3 of the workday

Constantly - Activity or condition exists 2/3 or more of the workday

In my opinion, Ms. McIntyre is capable of working full time in a sedentary position as of January 18, 2016. In my opinion, Ms. McIntyre is capable of performing a sedentary job (exerting up to 10 pounds of force occasionally and/or negligible amount of force frequently to lift, carry, push, pull or otherwise move objects including the human body and sitting most of the time with the exception of limited walking and standing for more than brief periods of time).

8. *Please identify the claimant's current medications, and also indicate what, if any, side effects they can or do present, and how, if at all, said side effects can impact claimant's work function.*

She currently uses tramadol, gabapentin, omeprazole, calcium and vitamin supplements. Tramadol and gabapentin can cause drowsiness and fatigue

Sincerely,

A handwritten signature in black ink, appearing to read 'KB', followed by a long horizontal line extending to the right.

Khalafalla Bushara, M.D.
Board Certified Neurologist

PHYSICAL CAPACITIES QUESTIONNAIRE

Name Melissa McIntyre

Date 12/16/2016

Date of Birth **Redacted**

Claim Number 22616002684

S. S. Number

Return to:

The purpose of this form is to help us determine the clinical condition of this individual. It is necessary for us to document functional impairment. Please reflect the patient's ability to perform these activities on a regular basis in an 8-hour workday.

	NOT AT ALL	Occasional 33% or Less	Frequent 34%-66%	Continuously 67%-100%
Sit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Stand	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walk	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bend at waist	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Squat at knees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climb - stairs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climb - ladders	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kneel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crawl	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Use Foot controls	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drive	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The patient can work at the following exertional level(s).

- ☒ Sedentary Lift – Exerting up to 10 pounds of force occasionally, and/or a negligible amount of force frequently.
- ☐ Light Lift – – Exerting up to 20 pounds of force occasionally, and/or up to 10 pounds of force frequently, and/or a negligible amount of force constantly
- ☐ Medium Lift – Exerting 20-50 pounds of force occasionally, and/or 10-25 pounds of force frequently, and/or a negligible up to 10 pounds amount of force constantly
- ☐ Heavy Lift – Exerting 50-100 pounds of force occasionally, and/or 25-50 pounds of force frequently, and/or 10-20 pounds amount of force constantly
- ☐ Very Heavy Lift – Exerting in excess of 100 pounds of force occasionally, and/or in excess of 50 pounds of force frequently, and/or in excess of 20 pounds amount of force constantly

(Please Complete Next Page)

Claimant's Name Melissa McIntyreDate 12/16/2016Please Circle Dominant Hand: RIGHT LEFT

The patient can use their RIGHT upper extremity for:

	NOT AT ALL	Occasional 33% or Less	Frequent 34%-66%	Continuously 67%-100%
Simple Grasping	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Reach above mid chest	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Reach at waist/desk level	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Pushing/Pulling	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fine Manipulation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Feeling/tactile sensation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

The patient can use their LEFT upper extremity for:

	NOT AT ALL	Occasional 33% or Less	Frequent 34%-66%	Continuously 67%-100%
Simple Grasping	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Reach above mid chest	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Reach at waist/desk level	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Pushing/Pulling	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fine Manipulation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Feeling/tactile sensation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Date of Last Examination 12/3/2016

Any other factors affecting the patient's physical abilities?

Any person who knowingly and with intent to injure, defraud or deceive Reliance Standard Life Insurance Company, files a statement of claim or submits any information in conjunction with a claim containing fraudulent, false, misleading, incomplete or deceptive information commits a fraudulent insurance act, which is a crime. These actions will result in the denial of the claim, and are subject to prosecution under state and/or federal law. Reliance Standard Life Insurance Company will cooperate fully with any prosecution and will seek any and all appropriate legal remedies.

Signature KBDate 12/16/2016

EP-1165

RSL001169

Khalafala Bushara, MD

Degree/Specialty Neurology

Name of health care provider completing this form (please print)

Khalafalla O. Bushara, M.D. **Curriculum Vitae**

EDUCATION

Faculty of Medicine University of Khartoum Sudan M.D., B.S.	October 1988
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CERTIFICATION

Royal College of Physicians of the UK (MRCP-UK) London, UK	November 1991
American Board of Neurology and Psychiatry	January 1999

AWARDS

Bob Allison Ataxia Research Foundation	2003
Veteran Affairs Administration Merit Review Grant	2002, 2006, 2011
Minnesota Medical Foundation	2001
Francis M. Foster Award (Wisconsin Neurological Society)	1994

MEDICAL LICENSE

Minnesota – No.44165 (active)
Washington, D.C. – No. MD31989 (inactive)
Wisconsin – No. 36831(inactive)
General Medical Council (UK) – No. 91/2415 (inactive)

CURRENT HOSPITAL PRIVILEGES

Minneapolis VA Medical Center
University Medical Center, Fairview
University Medical Center, Fairview -Riverside
Fairview Ridges Hospital

EXPERIENCE

Professor of Neurology University of Minnesota	2014 to Present
Associate Professor of Neurology University of Minnesota	2007 to 2014

Khalafalla O. Bushara, M.D.

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Assistant Professor of Neurology University of Minnesota	2000 to 2007
Staff Physician, Neurology Service Minneapolis VA Medical Center	2000 to Present
Senior Staff Fellow, Human Motor Control Section (movement disorders and neuro-imaging) Medical Neurology Branch, NINDS, NIH Bethesda, Maryland	1997 - 2000
Neurology Resident University of Wisconsin Hospitals and Clinics Madison, Wisconsin	1994 - 1997
Neurology Research Registrar Southend General Hospital, UK	1993 - 1994
Senior House-Officer in Neurosurgery Dundee Royal Infirmary University of Dundee, Scotland	1992 - 1993
Senior House-Officer in Neurology Dundee Royal Infirmary University of Dundee, Scotland	1993 - 1993
Senior House-Officer Internal Medicine University of Southampton Hospital Southampton, UK	1991 - 1992
Senior House-Officer in Internal Medicine Khartoum Teaching Hospital, Sudan	1990 - 1991
Junior House-Officer Khartoum Teaching Hospital, Sudan	1989 - 1991

PUBLICATIONS

Peer Reviewed Papers

1. R. Y. Lo, K. P. Figueroa, S. M. Pulst, S. Perlman, G. Wilmot, C. Gomez, J. Schmahmann, H. Paulson, V. G. Shakkottai, S. Ying, T. Zesiewicz, K. Bushara, M. Geschwind, G. Xia, J. T. Yu, L. E. Lee, T. Ashizawa, S. H. Subramony, and S. H. Kuo, "Depression and clinical progression in spinocerebellar ataxias," *Parkinsonism & related disorders* 22, 87-92 (2016);

RSL001172

Khalafalla O. Bushara, M.D.

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2. R. Y. Lo, K. P. Figueroa, S. M. Pulst, C. Y. Lin, S. Perlman, G. Wilmot, C. M. Gomez, J. Schmahmann, H. Paulson, V. G. Shakkottai, S. H. Ying, T. Zesiewicz, K. Bushara, M. Geschwind, G. Xia, S. H. Subramony, T. Ashizawa, and S. H. Kuo, "Vascular risk factors and clinical progression in spinocerebellar ataxias," *Tremor and other hyperkinetic movements* 5, 287 (2015);
3. R. Y. Lo, K. P. Figueroa, S. M. Pulst, C. Y. Lin, S. Perlman, G. Wilmot, C. Gomez, J. Schmahmann, H. Paulson, V. G. Shakkottai, S. Ying, T. Zesiewicz, K. Bushara, M. Geschwind, G. Xia, S. H. Subramony, T. Ashizawa, and S. H. Kuo, "Coenzyme Q10 and spinocerebellar ataxias," *Movement disorders* 30 (2), 214-220 (2015);
4. Moscovich M, Okun MS, Favilla C, Figueroa KP, Pulst SM, Perlman S, Wilmot G, Gomez C, Schmahmann J, Paulson H, Shakkottai V, Ying S, Zesiewicz T, Kuo SH, Mazzoni P, Bushara K, Xia G, Ashizawa T, Subramony SH (2014) Clinical Evaluation of Eye Movements in Spinocerebellar Ataxias: A Prospective Multicenter Study. *J Neuroophthalmol.* 35 (1), 16-21 (2015)
5. M. Bares, R. Apps, Z. Kikinis, D. Timmann, G. Oz, J. J. Ashe, M. Loft, S. Koutsikou, N. Cerminara, K. O. Bushara, and T. Kasperek, "Proceedings of the workshop on Cerebellum, Basal Ganglia and Cortical Connections Unmasked in Health and Disorder held in Brno, Czech Republic, October 17th, 2013," *Cerebellum* 14 (2), 142-150 (2015);
6. T. Ashizawa, K. P. Figueroa, S. L. Perlman, C. M. Gomez, G. R. Wilmot, J. D. Schmahmann, S. H. Ying, T. A. Zesiewicz, H. L. Paulson, V. G. Shakkottai, K. O. Bushara, S. H. Kuo, M. D. Geschwind, G. Xia, P. Mazzoni, J. P. Krischer, D. Cuthbertson, A. R. Holbert, J. H. Ferguson, S. M. Pulst, and S. H. Subramony, "Clinical characteristics of patients with spinocerebellar ataxias 1, 2, 3 and 6 in the US; a prospective observational study," *Orphanet journal of rare diseases* 8, 177 (2013).
7. Ashe J, Bushara K. The olivo-cerebellar system as a neural clock. *Advances in experimental medicine and biology* 2014;829:155-165.
8. Ashizawa, T., Figueroa, K.P., Perlman, S.L., Gomez, C.M., Wilmot, G.R., Schmahmann, J.D., Ying, S.H., Zesiewicz, T.A., Paulson, H.L., Shakkottai, V.G., **Bushara, K.O.**, Kuo, S.H., Geschwind, M.D., Xia, G., Mazzoni, P., Krischer, J.P., Cuthbertson, D., Holbert, A.R., Ferguson, J.H., Pulst, S.M., Subramony, S.H., Clinical characteristics of patients with spinocerebellar ataxias 1, 2, 3 and 6 in the US; a prospective observational study. *Orphanet J Rare Dis* 2013, 8, 177.
9. **Bushara, K.**, Bower, M., Liu, J., McFarland, K.N., Landrian, I., Hutter, D., Teive, H.A., Rasmussen, A., Mulligan, C.J., Ashizawa, T., Expansion of the Spinocerebellar ataxia type 10 (SCA10) repeat in a patient with Sioux Native American ancestry. *PLoS One*. 2013. 8, e81342.
10. Seyer LA, Galetta K, Wilson J, Sakai R, Perlman S, Mathews K, Wilmot GR, Gomez CM, Ravina B, Zesiewicz T, **Bushara KO**, Subramony SH, Ashizawa T, Delatycki MB, Brocht A, Balcer LJ, Lynch DR. Analysis of the visual system in Friedreich ataxia. *J Neurol.* 2013 Jun 18.
11. Regner SR, Wilcox, N, Friedman LS, Seyer, L, Schadt, K, Brigatti, K, Perlman, S, Delatycki, M, Wilmot, G, Gomez, CM, **Bushara, KO**, Mathews, KD, Subramony, SH, Ashizawa, T, Ravina, B, Brocht, A, Farmer, JM,

Khalafalla O. Bushara, M.D.

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- and David R. Lynch, DR. Friedreich Ataxia Clinical Outcome Measures: Natural History Evaluation in 410 Participants. *Journal of Child Neurology* 2012; 27 (9): 1152-1158.
12. Evans-Galea, MV, Carrodus, N, Rowley, SM, Corben, LA, Tai, G, Saffery, R, Galati, JC, Wong, NC, Craig, JM, Lynch, DR, Regner, S, Brocht, AFD, Perlman, SL, **Bushara, KO**, Gomez, CM, Wilmot, GR, Li, L, Varley, E, Delatycki, MB and Sarsero, JP. *FXN* methylation predicts expression and clinical outcome in Friedreich's ataxia. *Ann Neurol*, 2012; 71(4): 487–497.
 13. Wu X, He S, **Bushara K**, Zeng F, Liu Y, Zhang D. Dissociable neural correlates of contour completion and contour representation in illusory contour perception. *Hum Brain Mapp*. 2011; 33(10): 2407-2414.,
 14. Bower MA, **Bushara K**, Dempsey MA, Das S, Tuite PJ. Novel mutations in siblings with later-onset PLA2G6-associated neurodegeneration (PLAN). *Mov Disord*. 2011 Aug 1;26(9):1768-9.
 15. Wu X, Ashe J, **Bushara KO**. Role of olivocerebellar system in timing without awareness. *Proc Natl Acad Sci U S A* 2011; 108(33): 13818–13822.
 16. Oz G, Iltis I, Hutter D, Thomas W, **Bushara KO**, Gomez CM. Distinct neurochemical profiles of spinocerebellar ataxias 1, 2, 6, and cerebellar multiple system atrophy. *Cerebellum*; 2011;10: 208-17.
 17. Wu X, Nestrasil I, Ashe J, Tuite P, **Bushara K**. Inferior Olive Response to Passive Tactile and Visual Stimulation with Variable Inter-Stimulus Intervals. *Cerebellum*; 2010 Dec;9(4):598-602.
 18. Oz G, Hutter D, Tkac I, Clark HB, Gross MD, Jiang H, Eberly LE, **Bushara KO**, Gomez CM Neurochemical alterations in spinocerebellar ataxia type 1 and their correlations with clinical status. *Mov Disord* 2010. 25:1253-1261.
 19. Iltis I, Hutter D, **Bushara KO**, et al. (1)H MR spectroscopy in Friedreich's ataxia and ataxia with oculomotor apraxia type 2. *Brain Res* 2010;1358:200-10.
 20. Friedman LS, Farmer JM, Perlman S, Wilmot G, Gomez CM, **Bushara KO**, Mathews KD, Subramony SH, Ashizawa T, Balcer LJ, Wilson RB, Lynch DR. Measuring the rate of progression in Friedreich ataxia: Implications for clinical trial design. *Mov Disord*.2010 25:426- 32.
 21. Liu T, Xu D, Ashe J, **Bushara KO**. Specificity of inferior olive activation to stimulus timing. *J Neurophysiol*; 2008;100(3):1557-61.
 22. Oishi, N., Mima, T., Ishii, K., **Bushara, KO**., Hiraoka, T., Ueki, Y., Fukuyama, H. & Hallett, M. (2007). Neural correlates of regional EEG power change. *Neuroimage* 36, 1301-1312.
 23. Xu D, Liu T, Ashe J, **Bushara KO**. Role of the olivo-cerebellar system in timing. *J Neurosci* 2006;26(22):5990-5995.
 24. Gerloff C, **Bushara K**, Sailer A, Wassermann EM, Chen R, Matsuoka T, Waldvogel D, Wittenberg GF, Ishii K, Cohen LG, Hallett M. Multimodal imaging of brain reorganization in motor areas of the

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contralesional hemisphere of well recovered patients after capsular stroke. *Brain* 2006;129(Pt 3):791-808.

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27. Muley SA, **Bushara KO**. Isolated gait ataxia due to cerebellar vermis infarct. *Arch Neurol* 2004;61(9):1461.
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35. **Bushara KO**, Goebel SU, Shill H, Goldfarb LG, Hallett M. Gluten sensitivity in sporadic and hereditary cerebellar ataxia. *Ann Neurol* 2001;49(4):540-543.
36. **Bushara KO**, Wheat JM, Khan A, Mock BJ, Turski PA, Sorenson J, Brooks BR. Multiple tactile maps in the human cerebellum. *Neuroreport* 2001;12(11):2483-2486.
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38. Boroojerdi B, **Bushara KO**, Corwell B, Immisch I, Battaglia F, Muellbacher W, Cohen LG. Enhanced excitability of the human visual cortex induced by short-term light deprivation. *Cereb Cortex* 2000;10(5):529-534.

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39. Weeks RA, Aziz-Sultan A, **Bushara KO**, Tian B, Wessinger CM, Dang N, Rauschecker JP, Hallett M. A pet study of human auditory spatial processing. *Neurosci Lett* 1999;262(3):155-158.
40. **Bushara KO**, Weeks RA, Ishii K, Catalan MJ, Tian B, Rauschecker JP, Hallett M. Modality-specific frontal and parietal areas for auditory and visual spatial localization in humans. *Nature Neurosci* 1999;2(8):759-766.
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42. **Bushara KO**. Sialorrhea in amyotrophic lateral sclerosis: A hypothesis of a new treatment--botulinum toxin and injections of the parotid glands. *Med Hypotheses* 1997;48(4):337-339.
43. **Bushara KO**, Rust RS. Reversible MRI lesions due to pegaspargase treatment of non-Hodgkin's lymphoma. *Pediatr Neurol* 1997;17(2):185-187.
44. **Bushara K**, Wilson A, Rust RS. Facial palsy in Kawasaki syndrome. *Pediatr Neurol* 1997;17(4):362-364.
45. **Bushara KO**, Park DM, Jones JC, Schutta HS. Botulinum toxin--a possible new treatment for axillary hyperhidrosis. *Clin Exp Dermatol* 1996;21(4):276-278.
46. **Bushara KO**, Petermann G, Wacławik AJ, Brown WD, Schutta HS. Sarcoidosis of the spinal cord with extensive vertebral involvement: A case report. *Comput Med Imaging Graph* 1995;19(5):443-446.
47. **Bushara KO**, Park DM. Botulinum toxin and sweating. *J Neural Neurosurg Psychiatry* 1994;57(11):1437-1438.

Non-peer reviewed publications

1. **Bushara, K.**, 2013. We cannot cure ataxia, we can only eradicate it. *JAMA Neurol* 70, 1099.
2. **Bushara KO**. Neurologic presentation of celiac disease. *Gastroenterology* 2005; 128: S92-7.
3. Brooks BR, **Bushara K**, Khan A, Hershberger J, Wheat JO, Belden D, Henningsen H. Functional magnetic resonance imaging (fMRI) clinical studies in ALS--paradigms, problems and promises. *Amyotroph Lateral Scler Other Motor Neuron Disord* 2000;1 Suppl 2:S23-32.

Chapters in Books

Hallett M, Sadato N, Honda M, Ishii K, Waldvogel D, **Bushara KO**. Functional MRI of Sensorimotor System. In: *Functional MRI* (Moonen C and Bandettini PA; eds) New York, Springer, 1999.

Patient Education Material

Bushara KO. *What is Ataxia?* (Booklet) University of Minnesota, 2006.

Khalafalla O. Bushara, M.D.

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Reviewer

Ad hoc reviewer: *Annals of Neurology**, *Brain**, *Cerebral Cortex**, *Nature Neuroscience**, *NeuroImage**, *Journal of Neurophysiology*, *The Lancet**, *Trends In Cognitive Neuroscience*. (* Multiple reviews).
Member of proposals review panel: US Army Neurotoxin Exposure Treatment Research Program (NETRP) on the subject area of "Early Detection and New Therapeutic Strategies". November, 2000.

Reviewer, US Army Medical Research and Materiel Command (USAMRMC). November, 2001.

Reviewer, National Science Foundation.

Member, Expert Panel. National Consensus on Celiac Disease, June 2004

PRESENTATIONS

1. Cerebellar Ataxia. *Occupational Therapy Program*. The University Of Minnesota. December 2007.
2. Functional MRI of the inferior olive. *Neurology Grand Rounds*, University of Minnesota, July 2006.
3. Effect of Levetiracetam on Essential Tremor. *Neurology Grand Rounds*, University of Minnesota, Nov 2004.
4. Alcohols and Essential Tremor. *Neurology Grand Rounds*, University of Minnesota, Nov 2003.
5. Octanol for Essential Tremor. A double-blind, placebo-controlled trial *International Conference of Parkinson's Disease and Movement Disorders*, Miami, Florida, Nov 2002.
6. Gluten sensitivity In Huntington's Disease. *International Conference of Parkinson's Disease and Movement Disorders*, Miami, Florida, Nov 2002.
7. Open-label trial of gluten-free diet in sporadic and hereditary cerebellar ataxia with gluten sensitivity. *International Conference of Parkinson's Disease and Movement Disorders*, Miami, Florida, Nov 2002.
8. Cerebellar Ataxia and Gluten Sensitivity. *Neurology Grand Rounds*, University of Minnesota, Jan 2002.
9. Neural Correlates of Cross-modal Timing. *Brain Sciences Center Seminar*, Minneapolis VA Medical Center. October 2000.
10. Modality-Specific Frontal And Parietal Areas For Auditory and Visual Spatial localization In Humans. *Society of Neuroscience, 28th Annual meeting*, Los Angeles, Nov 1998.
11. Multiple Somatotopic Representations Of The Tactile Projections To The Intermediate Cerebellum In Humans. *American Neurological Association Annual Meeting*, Oct 1998, San Diego.
12. Decreased cortical activation to sensory stimulation in Amyotrophic Lateral Sclerosis; a functional magnetic resonance imaging study. *American Academy of Neurology 49th Annual Meeting*, Boston, April 1997.
13. Botulinum toxin and sweating. *The international conference on botulinum toxin*, Munich, Germany in June 1995.
14. The anhidrotic effect of botulinum toxin. *American Academy of Neurology Annual Meeting*, Seattle May 1995.
15. Botulinum toxin and sweating. *Wisconsin Neurological Society Annual Meeting*, Door County, WI, Oct 1994.

Invited Presentations

Khalafalla O. Bushara, M.D.

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"Cerebellar Ataxia and Allergy to Wheat". National Ataxia Foundation Annual Meeting, Memphis, Tennessee, March, 2007.

"Neurological/Psychological Presentation of Celiac Disease: Ataxia, Depression, Neuropathy, Seizures, and Autism". *NIH Consensus Development Conference on Celiac Disease*. National Institutes of Health, Bethesda, Maryland, June 28–30, 2004.

"Sensory representation in the human cerebellum". Neurology Grand Rounds, Howard University, Washington DC, March 1, 2000.

"Ataxia With Positive Celiac Antibodies." National Ataxia Foundation-Chesapeake Chapter Annual Meeting, Bethesda, Maryland, Jan 2000.

ABSTRACTS

Xu D, Arnold J, Anderson J, Rhem K, Rottenberg D, **Bushara K**. Multiple Multimodal And Modality-Specific Sensory Representations In The Cerebellar Cortex. *Neuroscience Abstracts*, 2004.

Bushara, KO, Xu D. Inferior olive fMRI activation is specific to stimulus timing. *Neuroscience Abstracts*, 2006.

Oishi N, Mima T, Ishii K, **Bushara KO**, Hiraoka T, Ueki Y, Fukuyama H, and Hallett M. Neural Correlates Of Regional Electroencephalogram Power Change. *Neuroscience Abstracts*, 2005.

Xu D, Liu T, Ashe J, and **Bushara K**. Neural Correlates of Perception and Motor Performance of Rhythm. *NeuroImage* 2005, 26 (Suppl 1): 67.

Liu T, Ashe J, Bushara K. Role Of Cerebellar Cortex In Spatial And Temporal Processing Of Visual Events. *Neuroscience Abstracts*, 2004.

Bushara K, Gomez C, Nance M. Gluten sensitivity In Huntington's Disease. *Movement Disorders* 2002; 17 (suppl 5): S314.

Bushara K, Shill H, Hallett M. Open-label trial of gluten-free diet in sporadic and hereditary cerebellar ataxia with gluten sensitivity. *Movement Disorders* 2002; 17 (suppl 5): S313.

Bushara K, Shill H, Hallett M. Octanol for Essential Tremor. A double-blind, placebo-controlled trial. *Movement Disorders* 2002; 17 (suppl 5): S346.

Shill H, **Bushara K**, Reich M, Grimes G, Hallett M. Dose-escalation study of oral 1-octanol in patients with essential tremor. *Movement Disorders* 2002; 17 (suppl 5): S350.

Wittenberg GF, **Bushara K**, Werhahn KJ, Wassermann EM, Horwitz B, Herscovitch P, Cohen LG. Cortical Somatosensory-Visual Connections In The Blind Revealed By Repetitive Transcranial Magnetic Stimulation During PET. *Neuroscience Abstracts*, 2000.

Khalafalla O. Bushara, M.D.

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Maillard L, Ishii K, **Bushara KO**, Waldvogel D, Schulman AE and Hallett M. Somatotopy In The Human Basal Ganglia. *Neuroimage* 1999, 9:78.

Ishii K, **Bushara K**, Dang N, and Hallett M. Role of cerebellum in visually-guided movement adaptation. *Neuroimage* 1999, 9:98.

Bushara KO, Weeks RA, Ishii K, Catalan MJ, Tian B, Rauschecker JP and Hallett M. Modality-Specific Frontal And Parietal Areas For Auditory and Visual Spatial localization In Humans. *Neuroscience Abstracts*, 1998, 24:658.1.

Bushara KO, Wheat JM, Mock BJ, Turski PA, Sorenson J, Brooks BR. Multiple Somatotopic Representations Of The Tactile Projections To The Intermediate Cerebellum In Humans. *Annals of Neurology* 1998, 44 (suppl 1): S70.

Khan A, Fernandez-Schmidt D, **Bushara K**, Brooks BR. Differential sensorimotor cortex (SMC) activation following cutaneous stimulation of the hand and foot in amyotrophic lateral sclerosis (ALS) – The effect of the Babinski response: A functional magnetic Resonance imaging (fMRI) study. *Neurology* 1998; 50 (suppl 4): A316–A317.

Schutta HS and **Bushara KO**. History of papilledema. *Neurology* 1998; 50 (suppl 4): A200.

Bushara K, Wheat J Mock BJ, Sorenson J, Lowe MJ, Brooks BR. Decreased cortical activation to sensory stimulation in Amyotrophic Lateral Sclerosis; a functional magnetic resonance imaging study. *Neurology* 1997, 47: A507.

Bushara KO, Rust RS. Reversible MRI lesions due to Pegapargase treatment of non-Hodgkin's lymphoma (NHL). *Annals of Neurology* 1996, 38 (suppl1): S65.

Bushara KO, Wilson A, Rust RS. Facial nerve palsy in Kawasaki disease. *Annals of Neurology* 1996, 38 (suppl1): S69.

Dixit S, **Bushara KO**, Brooks BR. Epidemic heat Stroke in a Midwest Community: Risk Factors, Neurological Complications and Sequelae. *Neurology* 1996;46 (2 suppl) :A241 - 42.

Bushara KO, Jones JC, Park DM. Localized graying of eye-brow hair; a side effect of botulinum toxin injections. *Movement Disorders* 1995;10(3):382.

Bushara KO, Jones JC, Park DM, Schutta HS. The anhidrotic effect of botulinum toxin. *Neurology* 1995;45 (suppl 4): A247- 48.

Bushara KO, Jones JC, Park DM, Schutta HS. Botulinum toxin and sweating. *Movement Disorders* 1995;10 (3):391.



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REA Review

DATE: December 22, 2016

Claimant: Melissa McIntyre
Claim #: 2011-09-27-0051-LTD-01
VR Consultant: Carol S. Vroman

A Residual Employability Analysis (REA) was performed on this file by this Vocational Rehabilitation Specialist on December 16, 2015 and was based on the 12/15/2015 medical review by Ingrid Bergstrom, RN, BSN, CCM. Nurse Bergstrom stated: *Based upon this information, Light R&LR's appear supported.* Occupational alternatives were identified: Utilization-Review Coordinator; Cardiac Monitor Technician; Hospital-Admitting Clerk; Nurse, Office; Unit Clerk; Wellness Coach, Telephone Triage Nurse, Nurse Case Manager, and Rehabilitation Nurse Case Manager.

The Senior Benefit Analyst has asked for an update to the REA to be based on the Independent Medical Examination conducted by Khalafalla Bushara, M.D., on December 3, 2016. Dr. Bushara states the following:

In my opinion, Ms. McIntyre is capable of working full time in a sedentary position as of January 18, 2016. In my opinion, Ms. McIntyre is capable of performing a sedentary job (exerting up to 10 pounds of force occasionally and/or negligible amount of force frequently to lift, carry, push, pull or otherwise move objects including the human body and sitting most of the time with the exception of limited walking and standing for more than brief periods of time).

Dr. Bushara also completed a Physical Capacities Questionnaire indicating the following:

- Sedentary lift;
- Continuous sitting;
- Occasional standing, walking, bending, and driving;
- No squatting, climbing stairs, climbing ladders, kneeling, crawling, and using foot controls;
- Frequent bilateral upper extremity simple grasping, reaching above mid chest, reaching at waist/desk level, fine manipulation, and feeling/tactile sensation; and
- Occasional bilateral upper extremity pushing and pulling.

Based on the restrictions and limitations provided by Dr. Bushara, the previously identified occupational alternatives of Utilization-Review Coordinator; Cardiac Monitor Technician; Hospital-Admitting Clerk; Wellness Coach, Telephone Triage Nurse, Nurse Case Manager, and Rehabilitation Nurse Case Manager continue to be viable and are consistent with Ms. McIntyre's education and employment history. Please see Match List attached for additional occupational alternatives.

RSL001180

The occupational alternatives of Nurse, Office; Unit Clerk; and Medical Assistant are no longer viable as they are outside the restrictions and limitations provided by Dr. Bushara.

Please see the REA report for additional details.

This opinion is presented with a reasonable degree of vocational rehabilitation certainty.

A handwritten signature in black ink, reading "Carol S. Vroman". The signature is fluid and cursive, with the first name "Carol" and last name "Vroman" clearly legible.

Carol S. Vroman, M.Ed., L.P.C., C.R.C.
Vocational Rehabilitation Specialist

U.S. Department of Labor. (1991). *Dictionary of Occupational Titles, 4th Edition*. Physical demands. Author.

S-Sedentary

Exerting up to 10 pounds of force occasionally and/or a negligible amount of force frequently to lift, carry, push, pull, or otherwise move objects, including the human body. Sedentary work involves sitting most of the time, but may involve walking or standing for brief periods of time. Jobs are sedentary if walking and standing are required only occasionally and all other sedentary criteria are met.

L- Light

Exerting up to 20 pounds of force occasionally, and/or 10 pounds of force frequently (one-third to two-thirds of the time), and for a negligible amount of force constantly (two-thirds or more of the time) to move objects. Physical demand requirements are in excess of those for Sedentary Work. Even though the weight lifted may be only a negligible amount, a job should be rated Light Work:

- 1) when it requires walking or standing to a significant degree: or
- 2) when it requires sitting most of the time, but entails pushing and/or pulling of arms or leg controls; and/or
- 3) when the job requires working at a production rate pace entailing the constant pushing and/or pulling of materials even though the weight of those materials is negligible.

M-Medium

Exerting 20 to 50 pounds of force occasionally, and/or 10 to 25 pounds of force frequently, and/or greater than negligible up to 10 pounds of force constantly to move objects. Physical demand requirements are in excess of those for Light Work

H-Heavy

Exerting 50-100 pounds of force occasionally, and/or 25 to 50 pounds of force frequently, and/or 10 to 20 pounds of force constantly to move objects. Physical demand requirements are in excess of those for Medium Work.

V-Very Heavy Work

Exerting in excess of 100 pounds of force occasionally, and/or in excess of 50 pounds of force frequently, and/or in excess of 20 pounds of force constantly to move objects. Physical demand requirements are in excess of those for Heavy Work.

DEFINITION OF FREQUENCY RATINGS:

Occasionally

Activity or condition exists up to 1/3 of the time.

Frequently

Activity or condition exists from 1/3 to 2/3 of the time.

Constantly

Activity or condition exists 2/3 or more of the time.

Residual Employability Analysis

A Residual Employability Analysis (“REA”) has been performed for this claim.

Purpose: An REA is typically performed to determine which occupations, if any, the Insured has the ability to perform.

Certification: REA’s are performed only by a Vocational Rehabilitation Specialist (“VRS”). The VRS must possess a Master’s Degree and must also have been awarded the Certified Rehabilitation Counselor (“CRC”) designation by satisfying the advanced education and experience requirements of the nationally accredited Commission on Rehabilitation Counselor Certification (“CRCC”). The VRS must also have passed the CRCC competency exam, must adhere to the CRCC Code of Professional Ethics and must maintain the CRC certification by complying with all applicable continuing education requirements in effect when the REA was performed.

Each REA is signed by the VRS who performed it, who is required to also certify that the results of the REA are presented with a reasonable degree of vocational rehabilitation certainty.

Methodology: The claim record is reviewed to assess the work history, educational background, training, transferable skills and residual work capacity of the Insured. In analyzing work history, each prior occupation is evaluated to determine relevant tasks, materials utilized, and the products produced or services rendered. A review of educational background includes length and type of schooling in addition to military background, hobbies, computer proficiency and any vocational training the Insured may have received.

The information concerning the Insured’s residual work capacity (typically expressed as restrictions and limitations, if any) to be used in conducting the REA is identified by the Claims Examiner responsible for the adjudication of the claim and is specifically cited in the final, certified REA report.

The OASYS Job Match System (“OASYS”) is then utilized to perform a preliminary transferable skills analysis. OASYS is generally recognized in the Vocational Rehabilitation community as an acceptable transferable skills analysis protocol, and utilizes (among other things) information developed by the United States Department of Labor concerning work tasks, strength, physical demands, general educational development, environmental conditions, work situations, temperaments, specific vocational preparation and aptitudes to identify potential alternative occupations.

The VRS then reviews the results of the OASYS Job Match System in conjunction with the relevant information in the claim record and develops a list of any appropriate alternative occupations which the Insured is able to perform based on their education, training or experience. An REA report is then prepared and certified by the VRS identifying any appropriate alternative occupations. Where available and applicable, descriptions of these alternative occupations based on information developed by the United States Department of Labor are attached to the REA report.

Name: McIntyre, Melissa

MATCH LIST

DOT Code	DOT Title	Exertion
205.162-010	Admitting Officer	S
237.367-010	Appointment Clerk	S
078.365-010	Cardiac Monitor Technician	S
187.167-034	Director, Nurses' Registry	S
078.264-010	Holter Scanning Technician	S
205.362-018	Hospital-Admitting Clerk	S
237.367-022	Information Clerk	S
237.367-038	Receptionist	S
187.167-186	Residence Supervisor	S
079.262-010	Utilization-Review Coordinator	S

Invoice 332840**Date of Invoice 12/21/2016****MLS Group of Companies**

P.O. Box 492417
 Redding CA 96049
 248-945-9001 Fax: 248-356-6757

Reliance Standard Life Insurance - PA,
 2 Commerce Square

Philadelphia, PA 19103

Attention: Susan Strickler

Case Id: 2011-09-27-0051-LTD-01

Referral Id: 22616003594

Name: MCINTYRE, MELISSA

Employer:

Physician: Khalafalla Bushara

Specialty: Neurology

Svc Date: 12/3/16

Item	Rate
Independent Medical Examination	2,100.00

Invoice Total \$2,100.00

Receipt Total 0.00

Invoice Balance **\$2,100.00**

Please visit our new web-site address located at www.mls-ime.com

Thank you
 MLS Tax ID #: 38-3341904

Please make checks payable to
 MLS Group of Companies, Inc.

RS1001185

**Law Office of
Katherine L. MacKinnon P.L.L.C.**

Katherine L. MacKinnon
katcmackinnon-atty@msn.com

Nicolet Lyon
nicolet@katcmackinnon.com

Sarah J. Demers
sarah@katcmackinnon.com

September 14, 2017

Susan Strickler
Reliance Standard Life Insurance Company
PO Box 8330
Philadelphia, PA 19101-8330

Sent via facsimile to: 1-267-256-4262

Re: Claimant: Melissa McIntyre
Claim No.: 2011-09-27-0051-LTD-01
Policy No.: LTD 121690
Insurer: Immanuel St. Joseph's-Mayo Health System

Dear Ms. Strickler:

Our office wrote to Reliance Standard on 07/28/17 and requested a copy of Ms. McIntyre's claim file. We have not yet received the file. Kindly send the requested materials as soon as possible.

Sincerely,



Sarah Demers

SJD/sjd
Enclosure

**Law Office of
Katherine L. MacKinnon P.L.L.C.**

Katherine L. MacKinnon
katcmackinnon-atty@msn.com

Nicolet Lyon
nicolet@katcmackinnon.com

Sarah J. Demers
sarah@katcmackinnon.com

July 28, 2017

Susan Strickler
Reliance Standard Life Insurance Company
PO Box 8330
Philadelphia, PA 19101-8330

Sent via facsimile to: 1-267-256-4262

Re: Claimant: Melissa McIntyre
Claim No.: 2011-09-27-0051-LTD-01
Policy No.: LTD 121690
Insurer: Immanuel St. Joseph's-Mayo Health System

Dear Ms. Strickler:

I have been retained by Ms. Melissa McIntyre to assist her regarding the termination of her long-term disability benefits. I am enclosing an authorization signed by Ms. McIntyre permitting Reliance Standard to communicate with me and to share information from its files. Kindly direct all future communications to me.

I request that Reliance Standard provide me with a complete copy of Ms. McIntyre's claim file and a copy of all relevant plan documents for her long-term disability claim. This would include, but is not limited to, all internal notes regarding Ms. McIntyre and her disability claim, and all communication Reliance Standard has sent or received regarding this claim. Also, I request that Reliance Standard disclose any document(s), policy(ies) or practice(s) that it relied upon to decide Ms. McIntyre's claim as required by 29 C.F.R. §§ 2560.503-1(h) (2) (iii) & (m)(8).

Sincerely,



Sarah Demers

SJD/sjd
Enclosure

2356 UNIVERSITY AVE WEST #230 • ST. PAUL, MN • 55114-1800
PHONE (952) 915-9215 • FAX: (952) 915-9217

RSL001187

AUTHORIZATION TO RELEASE
DISABILITY CLAIMS FILE AND TO COMMUNICATE WITH COUNSEL

I, Melissa McIntyre, hereby release to the Law Office of Katherine L. MacKinnon P.L.L.C., or its representative(s), any and all information contained in my long-term disability claim file under the group disability policy(ies) or plan(s) sponsored by Immanuel St. Joseph's-Mayo Health System and insured through group policies insured or administered by Reliance Standard Life Insurance Company. This authorization includes but is not limited to, any and all medical records and correspondence concerning me or my claims for long-term disability in the possession of Reliance Standard Life Insurance Company, or any insurer or other entity contracted to provide insurance or administration services for the St. Joseph's-Mayo Health System long-term disability plan, as well as the agents, representatives or employees, acting on behalf of the above. I also authorize the foregoing released parties to communicate with any representative of the Law Office of Katherine L. MacKinnon P.L.L.C. I agree that a photocopy of this authorization may be accepted with the same authority as the original.

Dated: 7-27-17By: 

Melissa McIntyre

Policy No.: LTD 121690

Claim No.: 2011-09-27-0051-LTD-01

From: ☐ RELIANCE STANDARD LIFE INSURANCE COMPANY
☐ FIRST RELIANCE STANDARD LIFE INSURANCE COMPANY
☐ RELIANCE STANDARD LIFE INSURANCE COMPANY OF TEXAS

For Inquiries
Refer To This
Number

103422

Ship To:

Brandt Law office, P.A.
ATTN: Jerold M Lucas
219 W Nassau PO Box #57
St Peter MN 56082

Instructions:

1. Fill out label and items below.
2. Use Location Address including Zip Code.
3. Send set to Data Center or Mail Center.
4. Originators copy will be returned as a receipt.

Department	Phone Number
Appeals	86728426
Name	STRICKLER
Loc. Code	Date
1722	9/26/17

Description Of Contents

Group Accounting Use Only	Policy Number		PH Name							
	Job Numbers									
	Pol				Flat					
	Qty									
	Certs									
	Class									
Job No.										
Qty.										

Printing Instructions:

Output Class - COG

- ☐ 1. ISIXRX (RSL Masthead - policy and flat certificate)
☐ 2. ISIXRX (RSL-TX Masthead - policy and flat certificate)
☐ 3. ISIXRX (FRSL Masthead - policy and flat certificate)
☐ 4. BOOKLET (standard booklet cover with text)
☐ 5. COVERS (covers only)
☐ 6. BOOKLET (covers done by outside vendor)
☐ 7. BROCHURES (RSL)
☐ 8. BROCHURES (RSL TX)
☐ 9. BROCHURES (FRSL)

Special Services

Overnight? <input checked="" type="checkbox"/> Yes	2nd Day Air? <input type="checkbox"/> Yes	Insure? <input type="checkbox"/> Yes	Value	Certify? <input type="checkbox"/> Yes	Return Receipt? <input type="checkbox"/> Yes
---	--	---	-------	--	---

Authorized Signature

Mail Center Use Only

Date Shipped From Mail Department	9-26-17	Number of Cartons	Total Weight
Wrapped and Shipped By	SLON	Shipped Via	FEDEX
Zone		Cost	41.87
Remarks			

Special Services Tracking Record

4083 8146 3658

From: ☐ RELIANCE STANDARD LIFE INSURANCE COMPANY
☐ FIRST RELIANCE STANDARD LIFE INSURANCE COMPANY
☐ RELIANCE STANDARD LIFE INSURANCE COMPANY OF TEXAS

For Inquiries
Refer To This
Number

103422

Ship To:

Brandt Law office, P.A.
ATTN: Jerold M Lucas
219 W Nassau PO Box #57
St Peter MN 56082

Instructions:

1. Fill out label and items below.
2. Use Location Address including Zip Code.
3. Send set to Data Center or Mail Center.
4. Originators copy will be returned as a receipt.

Department	Phone Number
Appeals	86728426
Name	STRICKLER
Loc. Code	Date
1722	9/26/17

Description Of Contents

Group Accounting Use Only	Policy Number		PH Name							
	Job Numbers									
	Pol				Flat					
	Qty									
	Certs									
	Class									
Job No.										
Qty.										

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Special Services

Overnight? <input checked="" type="checkbox"/> Yes	2nd Day Air? <input type="checkbox"/> Yes	Insure? <input type="checkbox"/> Yes	Value	Certify? <input type="checkbox"/> Yes	Return Receipt? <input type="checkbox"/> Yes
---	--	---	-------	--	---

Authorized Signature

Mail Center Use Only

Date Shipped From Mail Department	9-26-17	Number of Cartons	Total Weight
Wrapped and Shipped By	SLON	Shipped Via	FEDEX
Zone		Cost	41.87
Remarks			

Special Services Tracking Record

4083 8146 3658

From: ☐ RELIANCE STANDARD LIFE INSURANCE COMPANY
☐ FIRST RELIANCE STANDARD LIFE INSURANCE COMPANY
☐ RELIANCE STANDARD LIFE INSURANCE COMPANY OF TEXAS

For Inquiries
Refer To This **103423**
Number

Ship To:

Law Office of Katherine
 Attn: Sarah Demers
 Attn: 2356 University Ave West
 St Paul MN 55114-1800 #230

Instructions:

1. Fill out label and items below.
2. Use Location Address including Zip Code.
3. Send set to Data Center or Mail Center.
4. Originators copy will be returned as a receipt.

From Department: Legal Phone Number: 612-256-4262
 Name: STRICKER
 Loc. Code: 1722 Date: 10/2/17

Description Of Contents

Policy Number		PH Name	
Job Numbers			
Pol		Flat	
Qty			
Certs			
Class			
Job No.			
Qty.			

Printing Instructions:

Output Class - COG

☐ 1. ISIXRX (RSL Masthead - policy and flat certificate)
☐ 2. ISIXRX (RSL-TX Masthead - policy and flat certificate)
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☐ 9. BROCHURES (FRSL)

Special Services

Overnight? ☒ Yes 2nd Day Air? ☐ Yes Insure? ☐ Yes Value _____ Certify? ☐ Yes Return Receipt? ☐ Yes

Authorized Signature 

Mail Center Use Only

Date Shipped From Mail Department	Number of Cartons	Total Weight
Wrapped and Shipped By	Shipped Via	Zone
Cost		

Remarks

Special Services Tracking Record

408381265587

From: Strickler, Susan <Susan.Strickler@rsli.com>
Sent: Thursday, December 22, 2016 3:56 PM
To: Sundo, Lynn
Cc: Staples, Debra; McGill, Karen
Subject: uphold Melissa McIntyre 2011-09-27-0051-LTD-01
Attachments: ao ltd ime phys caps attorney rea's mcintyre, melissa.docx

Hi Lynn,

Please see attached.

Thanks!

Susan Strickler, HCAFA
Senior Benefits Analyst
Po Box 8330
Philadelphia PA 19103
Pn# 800-351-7500 x 4267
Fax# 267-256-3514

RELIANCE STANDARD
LIFE INSURANCE COMPANY
A MEMBER OF THE TOKIO MARINE GROUP

December 21, 2016

Brandt Law Office, P.A.
Attn: Jerold M. Lucas
219 W. Nassau, P.O. Box #57
St. Peter, MN 56082

Re: Claimant: Melissa McIntyre
Policy No: LTD 121690
Claim No: 2011-09-27-0051-LTD-01
Policyholder: Immanuel St Joseph's-Mayo Health System

Dear Mr. Lucas:

We are writing to you regarding the appeal of our decision to terminate Ms. McIntyre's claim for Long Term Disability ("LTD") benefits. Please be advised that Reliance Standard Life Insurance Company ("RSL") strives to treat all claimants fairly and evaluate claims submitted to us in an objective and equitable manner.

Under RSL's guidelines Ms. McIntyre is entitled to an independent review of the claim facts and the determination made regarding her eligibility for benefits. The file was referred to our Quality Review Unit to conduct such a review. This review has been conducted separately from the individual(s) who made the original decision to terminate benefits.

We have conducted an independent review of her claim file and have determined that our original decision to terminate benefits was appropriate.

Policy LTD 121690 contains the following provisions relevant to the review of Ms. McIntyre's claim:

TERMINATION OF MONTHLY BENEFIT: The Monthly Benefit will stop on the earliest of:

- (1) the date the Insured ceases to be Totally Disabled;
- (2) the date the Insured dies;
- (3) the Maximum Duration of Benefits, as shown on the Schedule of Benefits page, has ended; or
- (4) the date the Insured fails to furnish the required proof of Total Disability.

To be eligible for benefits, the group policy requires that medical documentation must substantiate that an employee, while insured under the group policy, meets the group policy's definition of Total Disability. The policy states in relevant part:

"Totally Disabled" and "Total Disability" mean, that as a result of an Injury or Sickness:

RSL001193

- (1) during the Elimination Period and for the first 24 months for which a Monthly Benefit is payable, an Insured cannot perform the material duties of his/her Regular Occupation;
 - (a) "Partially Disabled" and "Partial Disability" mean that as a result of an Injury or Sickness an Insured is capable of performing the material duties of his/her Regular Occupation on a part-time basis or some of the material duties on a full-time basis. An Insured who is Partially Disabled will be considered Totally Disabled, except during the Elimination Period;
 - (b) "Residual Disability" means being Partially Disabled during the Elimination Period. Residual Disability will be considered Total Disability; and
- (2) after a Monthly Benefit has been paid for 24 months, an Insured cannot perform the material duties of Any Occupation. We consider the Insured Totally Disabled if due to an Injury or Sickness he or she is capable of only performing the material duties on a part-time basis or part of the material duties on a Full-time basis.

If an Insured is employed by you and requires a license for such occupation, the loss of such license for any reason does not in and of itself constitute "Total Disability".

"Any Occupation" means an occupation normally performed in the national economy for which an Insured is reasonably suited based upon his/her education, training or experience.

The Claims Department determined that Ms. McIntyre was unable to perform the material duties of her Regular Occupation during the period of October 18, 2011 to October 18, 2013, and therefore she satisfied the definition of Total Disability during that time. To determine whether she continued to satisfy the definition of *Total Disability* from Any Occupation, we reviewed all of the information in her claim file, including but not limited to the information provided by her physician(s). As noted in the above referenced policy provisions, after benefits have been paid for 24 months, the definition of "Total Disability" changes. In order to remain "Totally Disabled" and continue to collect LTD benefits, one must be unable to perform the material duties of Any Occupation for which his/her education, training, or experience will reasonably allow.

To determine whether she continued to satisfy the definition of *Total Disability* from Any Occupation, we reviewed all of the information in her claim file, including but not limited to the information provided by her physician(s).

After a review of the materials within the claim file, it was determined that your client was capable of returning to a light level occupation. Light work is defined as follows:

The U.S. Department of Labor defines light work activity as exerting up to 20 pounds of force occasionally, and/or up to 10 pounds of force frequently, and/or a negligible amount of force constantly to move objects. Physical demand requirements are in excess of those for sedentary work activity. Even though the weight lifted may be only a negligible amount, a job should be rated light work activity: (1) when it requires walking or standing to a significant degree; or (2) when it requires sitting most of the time but entails pushing and/or pulling of arm or leg controls; and/or (3) when the job requires working at a production rate pace entailing the constant pushing and/or pulling of materials even though the weight of those materials is negligible.

Your client's file was referred to our Vocational Rehabilitation Specialist (VRS) who completed a Residual Employability Analysis (REA) and based on her training, education and experience, she has transferable skills in the following alternative occupations: Hospital-Admitting Clerk, Unit Clerk, Utilization-Review Coordinator, Cardiac Monitor Technician, Rehabilitation Nurse Case Manager, Office Nurse, Wellness Coach, Telephone Triage Nurse and Nurse Case Manager.

Based on the information above, the Claims Department determined that your client was capable of performing the alternative occupations listed above and therefore, she no longer satisfied the Policy definition of Total Disability as of January 18, 2016, and further benefits were terminated. This decision was communicated to her in a letter dated February 5, 2016, and she was afforded the right to appeal.

We received your request for an appeal with additional medical records and have conducted another review of her claim. In order to obtain insight as to any restrictions and/or limitations resultant of your client's condition(s), we determined it was necessary for her to undergo an Independent Medical Examination (IME) with an independent physician. She was referred to Khalafalla Bushara, M.D. who is Board Certified in Occupational Medicine.

When asked if Ms. McIntyre was capable of working full time as of January 18, 2016, Dr. Bushara opined:

In my opinion, Ms. McIntyre is capable of working full time in a sedentary position as of January 18, 2016. In my opinion, Ms. McIntyre is capable of performing a sedentary job (exerting up to 10 pounds of force occasionally and/or negligible amount of force frequently to lift, carry, push, pull or otherwise move objects including the human body and sitting most of the time with the exception of limited walking and standing for more than brief periods of time).

Regarding your client's ability to perform full-time work, based on the current presentation, Dr. Bushara completed a Physical Capacities Form. Dr. Bushara documented her restrictions and limitations in an eight-hour workday. Her ability to perform the following activities on a regular basis during an eight-hour workday is as follows:

Sitting	Continuously (67%-100%)
Standing	Occasionally (33% or less)
Walking	Occasionally (33% or less)
Bending at Waist	Occasionally (33% or less)
Squat at Knees	Not at all
Climbing-Stairs	Not at all
Climbing-Ladders	Not at all
Kneeling	Not at all
Crawling	Not at all

Use of Foot controls	Not at all
Drive	Occasionally (33% or less)
Lifting/carrying	Sedentary (exerting up to 10 pounds of force occasionally, and/or negligible amount of force frequently)

Right Upper Extremity

Simple Grasping	Frequently (34%-66%)
Reaching above mid-chest	Frequently (34%-66%)
Reaching at waist/desk	Frequently (34%-66%)
Pushing/Pulling	Occasionally (33% or less)
Fine manipulation	Frequently (34%-66%)
Feeling/tactile sensation	Frequently (34%-66%)

Left Upper Extremity

Simple Grasping	Frequently (34%-66%)
Reaching above mid-chest	Frequently (34%-66%)
Reaching at waist/desk	Frequently (34%-66%)
Pushing/Pulling	Occasionally (33% or less)
Fine manipulation	Frequently (34%-66%)
Feeling/tactile sensation	Frequently (34%-66%)

As explained above, in order to be eligible for benefits, there must be documentation of a physical or a mental impairment, which substantiates that you meet the group policy's definition of Total Disability, as defined above. In your current situation, the policy requires that you be Totally Disabled from performing the material duties of Any Occupation.

Based on the totality of the claim file, including the restrictions and limitations noted by Dr. Bushara your client is capable of returning to a sedentary occupation, as of January 18, 2016. Therefore, your client's file was referred back to our Vocational Rehabilitation Specialist for another review. Based on her restrictions and limitations, our Vocational Department identified the following alternative occupations: Utilization-Review Coordinator; Cardiac Monitor Technician; Hospital-Admitting Clerk; Wellness Coach, Telephone Triage Nurse, Nurse Case Manager, and Rehabilitation Nurse Case Manager. Although her neurologist, Dr. Tseng indicated that your client cannot stay in one position or perform one task for greater than thirty minutes, the occupations that have been identified above, allow for "breaks". In addition, within the employment evaluation, Ms. Schrot indicated that your client experienced, "fatigue, pain, neuropathy in the hands and feet, impact of concentration", however, Dr. Bushara noted that during the examination, your client showed normal tone and bulk in her upper extremity and, "the power was 5/5 on the right side and 5/5 on the left side".

We have concluded that based on the medical records, Physical Capabilities Questionnaire and IME, that Ms. McIntyre's condition was not of such a severity to render her unable to perform the material duties of Any Occupation on a full-time basis beyond January 18, 2016. While a period of impairment from performing her Regular Occupation was previously supported, as discussed in the body of this

letter, her condition as of January 18, 2016, did not render her unable to perform the material duties of Any Occupation as defined under Policy LTD 121690 and no further benefits are payable.

Please note that while we consider the determinations of Social Security and other insurers, they are not binding on RSL's decision as to whether or not she met the definition of "Total Disability" as set forth in the group policy. A person's entitlement to each of these benefits may be based upon a different set of guidelines, which sometimes may lead to differing conclusions. In addition, each benefit provider may also be considering different medical evidence in the evaluation of a claim. For example, in her situation, the Social Security Administration ("SSA") did not have the results of our IME completed on December 3, 2016 or other medical and vocational information RSL may have developed in her file. Had the SSA reviewed this report along with the other medical information obtained by us, they may have reached a different conclusion. In any event, the receipt of SSD benefits does not guarantee the receipt of LTD benefits or vice versa.

We regret that our decision could not have been more favorable to your client, however we are limited by the provisions of the Policy. Please be advised that our claim decision is now final as she has exhausted any administrative remedies available to her under the terms of the Policy.

Nothing in this letter should be construed as a waiver of any of RSL's rights and defenses under the above captioned policy, and all of these rights and defenses are reserved to the Company, whether or not specifically mentioned herein.

We will, upon specific request and free of charge, provide copies of all documents, records, and/or other information relevant to her claim for benefits. We will also, upon specific request and free of charge, provide copies of any internal rule, guideline, protocol or other similar criterion (if any) relied upon in making this determination.

In the event that her claim is subject to the Employee Retirement Income Security Act of 1974 ("the Act"), she has the right to bring civil action under section 502(a) of the Act following an adverse benefit determination on review. She and her plan may have other voluntary alternative dispute resolution options, such as mediation. One way to find out what may be eligible is to contact her local U.S. Department of Labor Office and her State insurance regulatory agency.

LEGAL ACTIONS: No legal action may be brought against us to recover on this Policy within sixty (60) days after written proof of loss has been given as required by this Policy. No action may be brought after three (3) years (Kansas, five (5) years; South Carolina, six (6) years) the time written proof of loss is required to be given.

Sincerely,

Susan Strickler

Susan Strickler, HCAFA
Senior Benefits Analyst
Quality Review Department

From: Myers, Alberta <Alberta.Myers@rsli.com>
Sent: Wednesday, March 7, 2012 11:47 AM
To: Cejkovsky, Stephen
Subject: Review of 2011 99 27 0051 ltd 01

QRP for Patrick
2011 99 27 0051 LTD 01 Melissa McIntyre.
Please refer to C9 Was the MN Limit reviewed? dx is not MN
no points were given. 0 s/b 15 points. pls review and advise.
thank you,

Alberta.Myers@rsli.com
Reliance Standard Life Insurance Co.
Two Commerce Square
Suite 1500
2001 Market St.
Philadelphia, PA 19103-7090
Fax 267 256 4262
Phone 267 256 3714

From: Cejkovsky, Stephen <Stephen.Cejkovsky@rsli.com>
Sent: Thursday, March 8, 2012 12:39 PM
To: Myers, Alberta
Subject: Re: Review of 2011 99 27 0051 ltd 01
Attachments: bradley4.xls

Corrected.

>>> Alberta Myers 3/7/2012 11:46 AM >>>
QRP for Patrick
2011 99 27 0051 LTD 01 Melissa McIntyre.
Please refer to C9 Was the MN Limit reviewed? dx is not MN
no points were given. 0 s/b 15 points. pls review and advise.
thank you,

Alberta.Myers@rsli.com
Reliance Standard Life Insurance Co.
Two Commerce Square
Suite 1500
2001 Market St.
Philadelphia, PA 19103-7090
Fax 267 256 4262
Phone 267 256 3714

From: Strickler, Susan <Susan.Strickler@rsli.com>
Sent: Thursday, December 22, 2016 3:56 PM
To: Sundo, Lynn
Cc: Staples, Debra; McGill, Karen
Subject: uphold Melissa McIntyre 2011-09-27-0051-LTD-01
Attachments: ao ltd ime phys caps attorney rea's mcintyre, melissa.docx

Hi Lynn,

Please see attached.

Thanks!

Susan Strickler, HCAFA
Senior Benefits Analyst
Po Box 8330
Philadelphia PA 19103
Pn# 800-351-7500 x 4267
Fax# 267-256-3514

From: Gretchen Lewis <GLewis@mls-ime.com> <GLewis@mls-ime.com>
Sent: Thursday, August 25, 2016 12:33 PM
To: Strickler, Susan
Subject: MLS exam notification for case 2011-09-27-0051-LTD-01.

Hi Susan:

This is to notify you that we received the referral on MELISSA MCINTYRE and she has been scheduled for an appointment with Dr. Rupert Exconde on 09/20/2016 1:40 PM.

The fees for the IME are: \$2200 IME, \$1500 no show and 72 hour cancellation.
Please let me know if the fees are approved.

If you have any questions, please do not hesitate to contact me at 888-657-4634.

Thank you,
Gretchen Lewis
The MLS Group

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From: Gretchen Lewis <GLewis@mls-ime.com> <GLewis@mls-ime.com>
Sent: Thursday, September 8, 2016 3:43 PM
To: Strickler, Susan
Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

This message originated outside of Reliance Standard's Network. Please use caution when opening attachments, clicking links or responding to requests for information.

Hi Susan,
We faxed it over to the attorney today. I will have a copy sent via mail also.
Thanks

-----Original Message-----

From: Susan.Strickler@rsli.com [mailto:Susan.Strickler@rsli.com]
Sent: Thursday, September 08, 2016 1:19 PM
To: Gretchen Lewis <GLewis@mls-ime.com>
Subject: Re: MLS exam notification for case 2011-09-27-0051-LTD-01.

Hi Gretchen,

Melissa McIntyre is being represented by an attorney. I'm having a hard time getting onto the MLS website to check to see if the Attorney information was included in the referral. Can you please make sure a copy of the IME appointment was sent to the attorney?

Here is his information:

Brandt Law Office
219 W Nassau
PO Box #57
St Peter MN 56082

Fax# 507-931-6909

Thanks!
Susan

Susan Strickler, HCAFA
Senior Benefit Analyst
Quality Review Department

Reliance Standard Life Ins.Co.
Po Box 8330
Philadelphia PA 19103
Pn# 1-800-351-7500 x 4267
Fax # 267-256-3514
Susan.Strickler@rsli.com

>>> Gretchen Lewis <GLewis@mls-ime.com> 8/25/2016 12:29 PM >>>
Hi Susan:

This is to notify you that we received the referral on MELISSA MCINTYRE and she has been scheduled for an appointment with Dr. Rupert Exconde on 09/20/2016 1:40 PM.

The fees for the IME are: \$2200 IME, \$1500 no show and 72 hour cancellation.
Please let me know if the fees are approved.

If you have any questions, please do not hesitate to contact me at 888-657-4634.

Thank you,
Gretchen Lewis
The MLS Group

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From: Gretchen Lewis <GLewis@mls-ime.com> <GLewis@mls-ime.com>
Sent: Monday, September 19, 2016 11:41 AM
To: Strickler, Susan
Subject: claim 2011-09-27-0051-LTD-01
Attachments: image001.gif; image002.jpg

Importance: High

This message originated outside of Reliance Standard's Network. Please use caution when opening attachments, clicking links or responding to requests for information.

Hi Susan

Dr's office just called me and told me they have to cancel the IME for McIntyre for tomorrow. Dr did not realize that there was a conflict of interest until he went thru the medical . Did you need MLS to call her and cancel the IME or did you want to speak to her?

Thanks !

Gretchen Lewis
Disability Scheduling Coordinator

[cid:image001.jpg@01D17ECF.9F59AF40]
www.mls-ime.com<<http://www.mls-ime.com/>>

29000 Inkster Road
Southfield, MI 48034
(O) 888-657-4634 Ext 165943
(D) 248-728-2943
(F) 248-356-6757
(E) glewis@mls-ime.com<<mailto:glewis@mls-ime.com>>

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From: Gretchen Lewis <GLewis@mls-ime.com> <GLewis@mls-ime.com>
Sent: Monday, September 19, 2016 12:02 PM
To: Strickler, Susan
Subject: RE: claim 2011-09-27-0051-LTD-01

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Hi Susan,
I will call the attorney asap. I am also waiting for a response from the Dr's office to see what dr's there were conflict with. The office did not have that info when I spoke to them. I wouldn't want to reschedule this and have it happen again. I will let you know as soon as I find out.
Thanks !

-----Original Message-----

From: Susan.Strickler@rsli.com [mailto:Susan.Strickler@rsli.com]
Sent: Monday, September 19, 2016 11:56 AM
To: Gretchen Lewis <GLewis@mls-ime.com>
Subject: Re: claim 2011-09-27-0051-LTD-01

Hi Gretchen,

The claimant is attorney represented. Please contact the attorney and advise them of the cancellation. Also, let them know that we will be scheduling another IME with a new independent physician.

Thanks!
Susan

Susan Strickler, HCAFA
Senior Benefit Analyst
Quality Review Department

Reliance Standard Life Ins.Co.
Po Box 8330
Philadelphia PA 19103
Pn# 1-800-351-7500 x 4267
Fax # 267-256-3514
Susan.Strickler@rsli.com

>>> Gretchen Lewis <GLewis@mls-ime.com> 9/19/2016 11:38 AM >>>

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Hi Susan

Dr's office just called me and told me they have to cancel the IME for McIntyre for tomorrow. Dr did not realize that there was a conflict of interest until he went thru the medical . Did you need MLS to call her and cancel the IME or did you want to speak to her?

Thanks !

Gretchen Lewis
Disability Scheduling Coordinator

[cid:image001.jpg@01D17ECF.9F59AF40]
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From: Gretchen Lewis <GLewis@mls-ime.com> <GLewis@mls-ime.com>
Sent: Monday, September 19, 2016 12:06 PM
To: Strickler, Susan
Subject: RE: claim 2011-09-27-0051-LTD-01

This message originated outside of Reliance Standard's Network. Please use caution when opening attachments, clicking links or responding to requests for information.

Hi Susan,
Spoke to the attorney personally and cancelled the IME.
Will keep you updated on the rest.
Thanks !

Gretchen Lewis
Disability Scheduling Coordinator

www.mls-ime.com

29000 Inkster Road
Southfield, MI 48034
(O) 888-657-4634 Ext 165943
(D) 248-728-2943
(F) 248-356-6757
(E) glewis@mls-ime.com

-----Original Message-----

From: Susan.Strickler@rsli.com [mailto:Susan.Strickler@rsli.com]
Sent: Monday, September 19, 2016 11:56 AM
To: Gretchen Lewis <GLewis@mls-ime.com>
Subject: Re: claim 2011-09-27-0051-LTD-01

Hi Gretchen,

The claimant is attorney represented. Please contact the attorney and advise them of the cancellation. Also, let them know that we will be scheduling another IME with a new independent physician.

Thanks!
Susan

Susan Strickler, HCAFA
Senior Benefit Analyst
Quality Review Department

Reliance Standard Life Ins.Co.
Po Box 8330
Philadelphia PA 19103
Pn# 1-800-351-7500 x 4267
Fax # 267-256-3514
Susan.Strickler@rsli.com

>>> Gretchen Lewis <GLewis@mls-ime.com> 9/19/2016 11:38 AM >>>

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Hi Susan

Dr's office just called me and told me they have to cancel the IME for McIntyre for tomorrow. Dr did not realize that there was a conflict of interest until he went thru the medical . Did you need MLS to call her and cancel the IME or did you want to speak to her? \

Thanks !

Gretchen Lewis
Disability Scheduling Coordinator

[cid:image001.jpg@01D17ECF.9F59AF40]
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From: Gretchen Lewis <GLewis@mls-ime.com> <GLewis@mls-ime.com>
Sent: Tuesday, September 20, 2016 1:45 PM
To: Strickler, Susan
Subject: RE: claim 2011-09-27-0051-LTD-01

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Hi Susan,
Looks like the next closest Dr not associated with the same group Dr Exconde is in about 80 miles away in Golden Valley. Are you ok with us scheduling her at this distance?
Thank you,

Gretchen Lewis
Disability Scheduling Coordinator

www.mls-ime.com

29000 Inkster Road
Southfield, MI 48034
(O) 888-657-4634 Ext 165943
(D) 248-728-2943
(F) 248-356-6757
(E) glewis@mls-ime.com

-----Original Message-----

From: Susan.Strickler@rsli.com [mailto:Susan.Strickler@rsli.com]
Sent: Monday, September 19, 2016 1:46 PM
To: Gretchen Lewis <GLewis@mls-ime.com>
Subject: RE: claim 2011-09-27-0051-LTD-01

Thanks Gretchen!!!

>>> Gretchen Lewis <GLewis@mls-ime.com> 9/19/2016 12:02 PM >>>

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Hi Susan,
Spoke to the attorney personally and cancelled the IME.

Will keep you updated on the rest.
Thanks !

Gretchen Lewis
Disability Scheduling Coordinator

www.mls-ime.com

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(D) 248-728-2943
(F) 248-356-6757
(E) glewis@mls-ime.com

-----Original Message-----

From: Susan.Strickler@rsli.com [mailto:Susan.Strickler@rsli.com]
Sent: Monday, September 19, 2016 11:56 AM
To: Gretchen Lewis <GLewis@mls-ime.com>
Subject: Re: claim 2011-09-27-0051-LTD-01

Hi Gretchen,

The claimant is attorney represented. Please contact the attorney and advise them of the cancellation. Also, let them know that we will be scheduling another IME with a new independent physician.

Thanks!
Susan

Susan Strickler, HCAFA
Senior Benefit Analyst
Quality Review Department

Reliance Standard Life Ins.Co.
Po Box 8330
Philadelphia PA 19103
Pn# 1-800-351-7500 x 4267
Fax # 267-256-3514
Susan.Strickler@rsli.com

>>> Gretchen Lewis <GLewis@mls-ime.com> 9/19/2016 11:38 AM >>>
This message originated outside of Reliance Standard's Network.

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Hi Susan

Dr's office just called me and told me they have to cancel the IME for McIntyre for tomorrow. Dr did not realize that there was a conflict of interest until he went thru the medical . Did you need MLS to call her and cancel the IME or did you want to speak to her?

Thanks !

Gretchen Lewis
Disability Scheduling Coordinator

[cid:image001.jpg@01D17ECF.9F59AF40]
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From: Gretchen Lewis <GLewis@mls-ime.com> <GLewis@mls-ime.com>
Sent: Monday, September 26, 2016 8:13 AM
To: Strickler, Susan
Subject: claim 2011-09-27-0051-LTD-01
Attachments: image002.jpg; image001.gif

This message originated outside of Reliance Standard's Network. Please use caution when opening attachments, clicking links or responding to requests for information.

Hi Susan,

We I heard back on the Dr's office we were trying to get this scheduled with and he has declined the case.

I have another Dr to try and am contacting his office today. I will let you know what they say when I reach them.

Thanks !

Gretchen Lewis
Disability Scheduling Coordinator

[cid:image001.jpg@01D17ECF.9F59AF40]
www.mls-ime.com<<http://www.mls-ime.com/>>

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(E) glewis@mls-ime.com<<mailto:glewis@mls-ime.com>>

ADDRESS CHANGE NOTICE - Effective 10/1/16, MLS' new address is 20750 Civic Center Drive, Suite 600, Southfield MI 48076

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From: Gretchen Lewis <GLewis@mls-ime.com> <GLewis@mls-ime.com>
Sent: Thursday, September 29, 2016 8:57 AM
To: Strickler, Susan
Subject: RE: claim 2011-09-27-0051-LTD-01

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Hi Susan,
The Dr's office got back with me and they declined this case.
I would have to go out further.
I can try a Sr about 145 miles out in Alexandria MN.
Let me know what you think about the distance.
Thank you,

Gretchen Lewis
Disability Scheduling Coordinator

www.mls-ime.com

29000 Inkster Road
Southfield, MI 48034
(O) 888-657-4634 Ext 165943
(D) 248-728-2943
(F) 248-356-6757
(E) glewis@mls-ime.com

ADDRESS CHANGE NOTICE - Effective 10/1/16, MLS' new address is 20750 Civic Center Drive, Suite 600, Southfield MI 48076

-----Original Message-----

From: Susan.Strickler@rsli.com [mailto:Susan.Strickler@rsli.com]
Sent: Tuesday, September 20, 2016 2:02 PM
To: Gretchen Lewis <GLewis@mls-ime.com>
Subject: RE: claim 2011-09-27-0051-LTD-01

I'm ok with it. I would check with the attorney and let them know.
Advise we can offer transportation.

Thanks!

Susan Strickler, HCAFA
Senior Benefit Analyst
Quality Review Department

Reliance Standard Life Ins.Co.
Po Box 8330
Philadelphia PA 19103
Pn# 1-800-351-7500 x 4267
Fax # 267-256-3514
Susan.Strickler@rsli.com

>>> Gretchen Lewis <GLewis@mls-ime.com> 9/20/2016 1:41 PM >>>

This message originated outside of Reliance Standard's Network.

Please use caution when opening attachments, clicking links or responding to requests for information.

Hi Susan,
Looks like the next closest Dr not associated with the same group Dr
Exconde is in about 80 miles away in Golden Valley. Are you ok with us
scheduling her at this distance?
Thank you,

Gretchen Lewis
Disability Scheduling Coordinator

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(D) 248-728-2943
(F) 248-356-6757
(E) glewis@mls-ime.com

-----Original Message-----

From: Susan.Strickler@rsli.com [mailto:Susan.Strickler@rsli.com]
Sent: Monday, September 19, 2016 1:46 PM
To: Gretchen Lewis <GLewis@mls-ime.com>
Subject: RE: claim 2011-09-27-0051-LTD-01

Thanks Gretchen!!!

>>> Gretchen Lewis <GLewis@mls-ime.com> 9/19/2016 12:02 PM >>>

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Hi Susan,

Spoke to the attorney personally and cancelled the IME.

Will keep you updated on the rest.

Thanks !

Gretchen Lewis

Disability Scheduling Coordinator

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(F) 248-356-6757

(E) glewis@mls-ime.com

-----Original Message-----

From: Susan.Strickler@rsli.com [mailto:Susan.Strickler@rsli.com]

Sent: Monday, September 19, 2016 11:56 AM

To: Gretchen Lewis <GLewis@mls-ime.com>

Subject: Re: claim 2011-09-27-0051-LTD-01

Hi Gretchen,

The claimant is attorney represented. Please contact the attorney and advise them of the cancellation. Also, let them know that we will be scheduling another IME with a new independent physician.

Thanks!

Susan

Susan Strickler, HCAFA

Senior Benefit Analyst

Quality Review Department

Reliance Standard Life Ins.Co.

Po Box 8330

Philadelphia PA 19103
Pn# 1-800-351-7500 x 4267
Fax # 267-256-3514
Susan.Strickler@rsli.com

>>> Gretchen Lewis <GLewis@mls-ime.com> 9/19/2016 11:38 AM >>>

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Hi Susan

Dr's office just called me and told me they have to cancel the IME for McIntyre for tomorrow. Dr did not realize that there was a conflict of interest until he went thru the medical . Did you need MLS to call her and cancel the IME or did you want to speak to her?

Thanks !

Gretchen Lewis
Disability Scheduling Coordinator

[cid:image001.jpg@01D17ECF.9F59AF40]
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From: Gretchen Lewis <GLewis@mls-ime.com> <GLewis@mls-ime.com>
Sent: Friday, September 30, 2016 11:05 AM
To: Strickler, Susan
Subject: MLS exam notification for case 2011-09-27-0051-LTD-01.

This message originated outside of Reliance Standard's Network. Please use caution when opening attachments, clicking links or responding to requests for information.

Hi Susan:

This is to notify you that MELISSA MCINTYRE has been scheduled for an appointment with Dr. Khalafalla Bushara on 10/22/2016 11:00 AM.

Dr had an office closer to the claimant. Its about 70 miles :) The fees for the IME are: \$2100 IME, \$1000 no show and 72 hour cancelation.

Please let me know if the fees are approved.

If you have any questions, please do not hesitate to contact me at 888-657-4634.

Thank you,
Gretchen Lewis
The MLS Group

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From: Gretchen Lewis <GLewis@mls-ime.com> <GLewis@mls-ime.com>
Sent: Wednesday, October 5, 2016 8:23 AM
To: Strickler, Susan
Subject: FW: MLS exam notification for case 2011-09-27-0051-LTD-01.

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Hi Susan,
Just following up to see if the fees are approved.
Thank you,

Gretchen Lewis
Disability Scheduling Coordinator

www.mls-ime.com

20750 Civic Center Drive, Suite 600
Southfield MI 48076

(O) 888-657-4634 Ext 165943
(D) 248-728-2943
(F) 248-356-6757
(E) glewis@mls-ime.com

-----Original Message-----

From: Gretchen Lewis
Sent: Friday, September 30, 2016 11:03 AM
To: 'susan.strickler@rsli.com' <susan.strickler@rsli.com>
Subject: MLS exam notification for case 2011-09-27-0051-LTD-01.

Hi Susan:

This is to notify you that MELISSA MCINTYRE has been scheduled for an appointment with Dr. Khalafalla Bushara on 10/22/2016 11:00 AM.

Dr had an office closer to the claimant. Its about 70 miles :) The fees for the IME are: \$2100 IME, \$1000 no show and 72 hour cancelation.

Please let me know if the fees are approved.

If you have any questions, please do not hesitate to contact me at 888-657-4634.

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Gretchen Lewis
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From: Gretchen Lewis <GLewis@mls-ime.com>
Sent: Tuesday, October 18, 2016 3:20 PM
To: Strickler, Susan
Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

From: Gretchen Lewis <GLewis@mls-ime.com>
Sent: Wednesday, October 19, 2016 2:07 PM
To: Strickler, Susan
Subject: FW: MLS exam notification for case 2011-09-27-0051-LTD-01.

From: Gretchen Lewis <GLewis@mls-ime.com>
Sent: Thursday, October 20, 2016 2:37 PM
To: Strickler, Susan
Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

From: Gretchen Lewis <GLewis@mls-ime.com>
Sent: Tuesday, October 25, 2016 10:00 AM
To: Strickler, Susan
Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

From: Gretchen Lewis <GLewis@mls-ime.com>
Sent: Wednesday, November 9, 2016 11:42 AM
To: Strickler, Susan
Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

Hi Susan,

Here is the update I sent on 10/20. I needed to know what you wanted MLS to do because the Dr cannot meet the attorney/claimant's request.

Hi Susan,

It was cancelled the other day when we spoke about it. As I indicated this was the closest Dr we had available. The call happened prior to your email asking that we cancel it. The Dr only goes to this facility on Saturday, which is 70 miles from the claimant.
Just let me know if you would like us to reschedule it with him.
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-----Original Message-----

From: Strickler, Susan [<mailto:Susan.Strickler@rsli.com>]
Sent: Thursday, October 20, 2016 2:32 PM
To: Gretchen Lewis <GLewis@mls-ime.com>

Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

Hi Gretchen,

I received another voice mail from the attorney. He stated someone called from MLS confirming the claimant would be attending the appointment scheduled this Saturday.

Please see my email below. He would like a call asap to make sure this appointment has been cancelled. Also, we need to see if there is another physician closer.

Thanks!

Susan Strickler, HCAFA
Senior Benefits Analyst
Po Box 8330
Philadelphia PA 19103
Pn# 800-351-7500 x 4267
Fax# 267-256-3514

-----Original Message-----

From: Strickler, Susan
Sent: Tuesday, October 18, 2016 3:02 PM
To: 'Gretchen Lewis <GLewis@mls-ime.com>' <GLewis@mls-ime.com>
Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

Hi Gretchen,

I just received a letter from the attorney. They have indicated the physician assigned is over 3 hours away one way and the appointment is scheduled on a Saturday. The claimant is not available and the length of travel is too far.

The claimant's address is 929 Charles Ave, Mankato MN 56001.

You mentioned a physician 70 miles away. Can you look into a closer physician and a different date?

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The MLS Group

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Hi Gretchen,

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Fax# 267-256-3514

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From: Strickler, Susan
Sent: Tuesday, October 25, 2016 9:57 AM
To: 'Gretchen Lewis <GLewis@mls-ime.com>' <GLewis@mls-ime.com>
Subject: FW: MLS exam notification for case 2011-09-27-0051-LTD-01.

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You mentioned a physician 70 miles away. Can you look into a closer physician and a different date?

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From: Gretchen Lewis <GLewis@mls-ime.com>
Sent: Wednesday, November 9, 2016 12:18 PM
To: Strickler, Susan
Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

Hi Susan,
I am sorry I didn't see any thing asking me to reset at 70 miles.
I will get on it ASAP. Again sorry about any confusion!
Thank you

Gretchen Lewis
Disability Scheduling Coordinator

www.mls-ime.com

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From: Strickler, Susan [<mailto:Susan.Strickler@rsli.com>]
Sent: Wednesday, November 09, 2016 12:09 PM
To: Gretchen Lewis <GLewis@mls-ime.com>
Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

Hi Gretchen,

Right, I thought I asked to reschedule the 70 mile appointment, maybe I'm wrong.

If I am, then yes, please reschedule the appointment for the 70 mile appointment.

Thanks!

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Fax# 267-256-3514

-----Original Message-----

From: Gretchen Lewis [mailto:GLewis@mls-ime.com]
Sent: Wednesday, November 09, 2016 11:41 AM
To: Strickler, Susan <Susan.Strickler@rsli.com>
Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

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Po Box 8330
Philadelphia PA 19103
Pn# 800-351-7500 x 4267
Fax# 267-256-3514

-----Original Message-----

From: Strickler, Susan
Sent: Tuesday, October 25, 2016 9:57 AM
To: 'Gretchen Lewis <GLewis@mls-ime.com>' <GLewis@mls-ime.com>
Subject: FW: MLS exam notification for case 2011-09-27-0051-LTD-01.

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From: Gretchen Lewis <GLewis@mls-ime.com>
Sent: Wednesday, November 9, 2016 3:40 PM
To: Strickler, Susan
Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

Hi Susan,
12/3/16 230pm is the new date.
I will send letters out as soon as possible Thank you !

Gretchen Lewis
Disability Scheduling Coordinator

www.mls-ime.com

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The MLS Group

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From: Strickler, Susan [mailto:Susan.Strickler@rsli.com]

Sent: Wednesday, November 09, 2016 11:35 AM

To: Gretchen Lewis <GLewis@mls-ime.com>

Subject: FW: MLS exam notification for case 2011-09-27-0051-LTD-01.

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Senior Benefits Analyst
Po Box 8330
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Fax# 267-256-3514

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From: Strickler, Susan

Sent: Tuesday, October 25, 2016 9:57 AM

To: 'Gretchen Lewis <GLewis@mls-ime.com>' <GLewis@mls-ime.com>

Subject: FW: MLS exam notification for case 2011-09-27-0051-LTD-01.

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From: Strickler, Susan
Sent: Thursday, October 20, 2016 2:32 PM
To: 'Gretchen Lewis <GLewis@mls-ime.com>' <GLewis@mls-ime.com>
Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

Hi Gretchen,

I received another voice mail from the attorney. He stated someone called from MLS confirming the claimant would be attending the appointment scheduled this Saturday.

Please see my email below. He would like a call asap to make sure this appointment has been cancelled. Also, we need to see if there is another physician closer.

Thanks!

Susan Strickler, HCAFA
Senior Benefits Analyst
Po Box 8330
Philadelphia PA 19103
Pn# 800-351-7500 x 4267
Fax# 267-256-3514

-----Original Message-----

From: Strickler, Susan
Sent: Tuesday, October 18, 2016 3:02 PM
To: 'Gretchen Lewis <GLewis@mls-ime.com>' <GLewis@mls-ime.com>
Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

Hi Gretchen,

I just received a letter from the attorney. They have indicated the physician assigned is over 3 hours away one way and the appointment is scheduled on a Saturday. The claimant is not available and the length of travel is too far.

The claimant's address is 929 Charles Ave, Mankato MN 56001.

You mentioned a physician 70 miles away. Can you look into a closer physician and a different date?

Thanks!

Susan Strickler, HCAFA
Senior Benefits Analyst
Po Box 8330
Philadelphia PA 19103
Pn# 800-351-7500 x 4267
Fax# 267-256-3514

-----Original Message-----

From: Gretchen Lewis <GLewis@mls-ime.com> [mailto:GLewis@mls-ime.com]
Sent: Friday, September 30, 2016 11:05 AM
To: Strickler, Susan <Susan.Strickler@rsli.com>
Subject: MLS exam notification for case 2011-09-27-0051-LTD-01.

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Hi Susan:

This is to notify you that MELISSA MCINTYRE has been scheduled for an appointment with Dr. Khalafalla Bushara on 10/22/2016 11:00 AM.

Dr had an office closer to the claimant. Its about 70 miles :) The fees for the IME are: \$2100 IME, \$1000 no show and 72 hour cancelation.
Please let me know if the fees are approved.

If you have any questions, please do not hesitate to contact me at 888-657-4634.

Thank you,
Gretchen Lewis
The MLS Group

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From: Gretchen Lewis <GLewis@mls-ime.com>
Sent: Wednesday, November 9, 2016 3:51 PM
To: Strickler, Susan
Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

Happy too! I will cc you on the letter

-----Original Message-----

From: Strickler, Susan [mailto:Susan.Strickler@rsli.com]
Sent: Wednesday, November 09, 2016 3:50 PM
To: Gretchen Lewis <GLewis@mls-ime.com>
Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

Great! Can you also let the attorney know that this physician only has Saturday appointments for IME's? This is one of his concerns. Just a line in the letter would be sufficient.

Thanks!

Susan Strickler, HCAFA
Senior Benefits Analyst
Po Box 8330
Philadelphia PA 19103
Pn# 800-351-7500 x 4267
Fax# 267-256-3514

-----Original Message-----

From: Gretchen Lewis [mailto:GLewis@mls-ime.com]
Sent: Wednesday, November 09, 2016 3:40 PM
To: Strickler, Susan <Susan.Strickler@rsli.com>
Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

Hi Susan,
12/3/16 230pm is the new date.
I will send letters out as soon as possible Thank you !

Gretchen Lewis
Disability Scheduling Coordinator

www.mls-ime.com

20750 Civic Center Drive, Suite 600
Southfield MI 48076

(O) 888-657-4634 Ext 165943
(D) 248-728-2943

(F) 248-356-6757
(E) glewis@mls-ime.com

-----Original Message-----

From: Strickler, Susan [mailto:Susan.Strickler@rsli.com]
Sent: Wednesday, November 09, 2016 12:09 PM
To: Gretchen Lewis <GLewis@mls-ime.com>
Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

Hi Gretchen,

Right, I thought I asked to reschedule the 70 mile appointment, maybe I'm wrong.

If I am, then yes, please reschedule the appointment for the 70 mile appointment.

Thanks!

Susan Strickler, HCAFA
Senior Benefits Analyst
Po Box 8330
Philadelphia PA 19103
Pn# 800-351-7500 x 4267
Fax# 267-256-3514

-----Original Message-----

From: Gretchen Lewis [mailto:GLewis@mls-ime.com]
Sent: Wednesday, November 09, 2016 11:41 AM
To: Strickler, Susan <Susan.Strickler@rsli.com>
Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

Hi Susan,

Here is the update I sent on 10/20. I needed to know what you wanted MLS to do because the Dr cannot meet the attorney/claimant's request.

Hi Susan,

It was cancelled the other day when we spoke about it. As I indicated this was the closest Dr we had available. The call happened prior to your email asking that we cancel it. The Dr only goes to this facility on Saturday, which is 70 miles from the claimant.
Just let me know if you would like us to reschedule it with him.

Thank you !

Gretchen Lewis
Disability Scheduling Coordinator

www.mls-ime.com

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Southfield MI 48076

(O) 888-657-4634 Ext 165943
(D) 248-728-2943
(F) 248-356-6757
(E) glewis@mls-ime.com

-----Original Message-----

From: Strickler, Susan [mailto:Susan.Strickler@rsli.com]
Sent: Thursday, October 20, 2016 2:32 PM
To: Gretchen Lewis <GLewis@mls-ime.com>
Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

Hi Gretchen,

I received another voice mail from the attorney. He stated someone called from MLS confirming the claimant would be attending the appointment scheduled this Saturday.

Please see my email below. He would like a call asap to make sure this appointment has been cancelled. Also, we need to see if there is another physician closer.

Thanks!

Susan Strickler, HCAFA
Senior Benefits Analyst
Po Box 8330
Philadelphia PA 19103
Pn# 800-351-7500 x 4267
Fax# 267-256-3514

-----Original Message-----

From: Strickler, Susan

Sent: Tuesday, October 18, 2016 3:02 PM
To: 'Gretchen Lewis <GLewis@mls-ime.com>' <GLewis@mls-ime.com>
Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

Hi Gretchen,

I just received a letter from the attorney. They have indicated the physician assigned is over 3 hours away one way and the appointment is scheduled on a Saturday. The claimant is not available and the length of travel is too far.

The claimant's address is 929 Charles Ave, Mankato MN 56001.

You mentioned a physician 70 miles away. Can you look into a closer physician and a different date?

Thanks!

Susan Strickler, HCAFA
Senior Benefits Analyst
Po Box 8330
Philadelphia PA 19103
Pn# 800-351-7500 x 4267
Fax# 267-256-3514

-----Original Message-----

From: Gretchen Lewis <GLewis@mls-ime.com> [mailto:GLewis@mls-ime.com]
Sent: Friday, September 30, 2016 11:05 AM
To: Strickler, Susan <Susan.Strickler@rsli.com>
Subject: MLS exam notification for case 2011-09-27-0051-LTD-01.

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Hi Susan:

This is to notify you that MELISSA MCINTYRE has been scheduled for an appointment with Dr. Khalafalla Bushara on 10/22/2016 11:00 AM.

Dr had an office closer to the claimant. Its about 70 miles :) The fees for the IME are: \$2100 IME, \$1000 no show and 72 hour cancelation.
Please let me know if the fees are approved.

If you have any questions, please do not hesitate to contact me at 888-657-4634.

Thank you,
Gretchen Lewis
The MLS Group

-----Original Message-----

From: Strickler, Susan [mailto:Susan.Strickler@rsli.com]
Sent: Wednesday, November 09, 2016 11:35 AM

To: Gretchen Lewis <GLewis@mls-ime.com>
Subject: FW: MLS exam notification for case 2011-09-27-0051-LTD-01.

Hi Gretchen,

We had a problem with our email system so I'm not sure if you provided an update or not. Do you have an appointment scheduled for the above claimant?

Thanks!

Susan Strickler, HCAFA
Senior Benefits Analyst
Po Box 8330
Philadelphia PA 19103
Pn# 800-351-7500 x 4267
Fax# 267-256-3514

-----Original Message-----

From: Strickler, Susan
Sent: Tuesday, October 25, 2016 9:57 AM
To: 'Gretchen Lewis <GLewis@mls-ime.com>' <GLewis@mls-ime.com>
Subject: FW: MLS exam notification for case 2011-09-27-0051-LTD-01.

Hi Gretchen,

Just following up on my email below. Did you reach out to the attorney?

Thanks!
Susan

Susan Strickler, HCAFA
Senior Benefits Analyst
Po Box 8330
Philadelphia PA 19103
Pn# 800-351-7500 x 4267
Fax# 267-256-3514

-----Original Message-----

From: Strickler, Susan
Sent: Thursday, October 20, 2016 2:32 PM
To: 'Gretchen Lewis <GLewis@mls-ime.com>' <GLewis@mls-ime.com>
Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

Hi Gretchen,

I received another voice mail from the attorney. He stated someone called from MLS confirming the claimant would be attending the appointment scheduled this Saturday.

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Susan Strickler, HCAFA
Senior Benefits Analyst
Po Box 8330
Philadelphia PA 19103
Pn# 800-351-7500 x 4267
Fax# 267-256-3514

-----Original Message-----

From: Strickler, Susan
Sent: Tuesday, October 18, 2016 3:02 PM
To: 'Gretchen Lewis <GLewis@mls-ime.com>' <GLewis@mls-ime.com>
Subject: RE: MLS exam notification for case 2011-09-27-0051-LTD-01.

Hi Gretchen,

I just received a letter from the attorney. They have indicated the physician assigned is over 3 hours away one way and the appointment is scheduled on a Saturday. The claimant is not available and the length of travel is too far.

The claimant's address is 929 Charles Ave, Mankato MN 56001.

You mentioned a physician 70 miles away. Can you look into a closer physician and a different date?

Thanks!

Susan Strickler, HCAFA
Senior Benefits Analyst
Po Box 8330
Philadelphia PA 19103
Pn# 800-351-7500 x 4267
Fax# 267-256-3514

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From: Gretchen Lewis <GLewis@mls-ime.com> [mailto:GLewis@mls-ime.com]
Sent: Friday, September 30, 2016 11:05 AM
To: Strickler, Susan <Susan.Strickler@rsl.com>
Subject: MLS exam notification for case 2011-09-27-0051-LTD-01.

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Hi Susan:

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Dr had an office closer to the claimant. Its about 70 miles :) The fees for the IME are: \$2100 IME, \$1000 no show and 72 hour cancelation.

Please let me know if the fees are approved.

If you have any questions, please do not hesitate to contact me at 888-657-4634.

Thank you,
Gretchen Lewis
The MLS Group

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From: Gretchen Lewis <GLewis@mls-ime.com>
Sent: Monday, December 5, 2016 10:01 AM
To: Strickler, Susan
Subject: MLS Exam notification for case 2011-09-27-0051-LTD-01.

Hello Susan Strickler: This is to inform you that Dr. Khalafalla Bushara completed the evaluation on 12/03/2016 re: MELISSA MCINTYRE, your client file: 2011-09-27-0051-LTD-01. You will receive the report upon completion. Thank you for the referral.

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From: Gretchen Lewis <GLewis@mls-ime.com>
Sent: Friday, December 9, 2016 9:43 AM
To: Strickler, Susan
Subject: Claim 2011-09-27-0051-LTD-01.

Hi Susan,
Just a note to let you know we are still expecting the report from the Dr. We have asked for it ASAP.
We will keep you updated on the status as it is available.
Thank you !

Gretchen Lewis
Disability Scheduling Coordinator

www.mls-ime.com

20750 Civic Center Drive, Suite 600
Southfield MI 48076

(O) 888-657-4634 Ext 165943
(D) 248-728-2943
(F) 248-356-6757
(E) glewis@mls-ime.com

-----Original Message-----

From: Gretchen Lewis
Sent: Monday, December 05, 2016 10:00 AM
To: 'susan.strickler@rsli.com' <susan.strickler@rsli.com>
Subject: MLS Exam notification for case 2011-09-27-0051-LTD-01.

Hello Susan Strickler: This is to inform you that Dr. Khalafalla Bushara completed the evaluation on 12/03/2016 re: MELISSA MCINTYRE, your client file: 2011-09-27-0051-LTD-01. You will receive the report upon completion. Thank you for the referral.

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From: Gretchen Lewis <GLewis@mls-ime.com>
Sent: Wednesday, December 14, 2016 3:24 PM
To: Strickler, Susan
Subject: FW: Claim 2011-09-27-0051-LTD-01.

Hi Susan,

We are still waiting for the report to come in on this one. I have asked for it today . If I don't see it in the next 24 hours, I am asking management to get involved.

Thank you !

Gretchen Lewis
Disability Scheduling Coordinator

www.mls-ime.com

20750 Civic Center Drive, Suite 600
Southfield MI 48076

(O) 888-657-4634 Ext 165943
(D) 248-728-2943
(F) 248-356-6757
(E) glewis@mls-ime.com

-----Original Message-----

From: Gretchen Lewis
Sent: Friday, December 09, 2016 9:43 AM
To: 'Strickler, Susan' <Susan.Strickler@rsli.com>
Subject: Claim 2011-09-27-0051-LTD-01.

Hi Susan,

Just a note to let you know we are still expecting the report from the Dr. We have asked for it ASAP.

We will keep you updated on the status as it is available.

Thank you !

Gretchen Lewis

Disability Scheduling Coordinator

www.mls-ime.com

20750 Civic Center Drive, Suite 600
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(O) 888-657-4634 Ext 165943
(D) 248-728-2943
(F) 248-356-6757
(E) glewis@mls-ime.com

-----Original Message-----

From: Gretchen Lewis

Sent: Monday, December 05, 2016 10:00 AM

To: 'susan.strickler@rsli.com' <susan.strickler@rsli.com>

Subject: MLS Exam notification for case 2011-09-27-0051-LTD-01.

Hello Susan Strickler: This is to inform you that Dr. Khalafalla Bushara completed the evaluation on 12/03/2016 re: MELISSA MCINTYRE, your client file: 2011-09-27-0051-LTD-01. You will receive the report upon completion. Thank you for the referral.

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From: Kathleen Earley <KEarley@mls-ime.com>
Sent: Friday, December 16, 2016 11:16 AM
To: Strickler, Susan
Subject: MLS Exam notification for case 2011-09-27-0051-LTD-01.

Hello Susan Strickler: This is to inform you that IME report draft was returned to Dr. Khalafalla Bushara for completion of edits on 12/16/2016 re: MELISSA MCINTYRE, your client file: 2011-09-27-0051-LTD-01. You will receive the report upon completion. Thank you for the referral.

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From: Anne Miller <AMiller@mls-ime.com>
Sent: Friday, December 16, 2016 2:01 PM
To: Strickler, Susan
Subject: Document from MLS (Claim Number : 2011-09-27-0051-LTD-01)
Attachments: 22616003594_00_01_20161216135841.pdf; 22616003594_00_41_20161216140005.pdf

Please note the attached document for your review regarding MELISSA MCINTYRE, your client file:2011-09-27-0051-LTD-01, Our Case: 22616003594-0. Feel free to contact us with any questions or concerns PLEASE SEE ATTACHED REPORT FORM AND CV THANK YOU!

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MLS Group of Companies, Inc.

MLS National Medical Evaluation Services

Report #201602-0034 | Date: 03/03/2016 | www.mls-nme.com

December 16, 2016

MLS Group of Companies
29000 Inkster Road Suite 100
Southfield, MI 48034

RE: Melissa McIntyre

Date of Birth: Redacted
Date of Loss: 07/20/2011
Date of IME: 12/03/2016
Claim Number: 22616002684
Case Number: 20010374

Dear Ms. Lewis:

Melissa McIntyre was seen for an independent medical examination on the December 3, 2016, in Burnsville, Minnesota.

HISTORY

Melissa McIntyre is a 46-year-old right-handed woman evaluated for work disability. Ms. McIntyre suffers from Charcot-Marie-Tooth syndrome (type II)(hereditary motor sensory neuropathy type II). She indicated she worked as a registered nurse and was hired in 2003. Her job involved working on the hospital floor as well as the emergency room with active patient care. She indicated around 2011, she had difficulty performing her job due to disabilities from Charcot-Marie-Tooth syndrome.

CURRENT SYMPTOMS

Currently, Ms. McIntyre complains of numbness, pain, tingling, and restlessness in the legs and feet. She had weakness of the feet and lower legs and uses AFOs bilaterally (she has been using AFOs since February 2016). She uses a walker to ambulate long distances and a cane to ambulate short distances. Ms. McIntyre also reports weakness

RSL001261

RE: Melissa McIntyre

Page: 2

of the upper extremities with tendency to drop things, especially from the left hand. She also reports bladder symptoms, which she describes as difficulty in bladder emptying. She denies incontinence. Denies catheter use. She states that she used Flomax, which did not help. She reports fatigue, otherwise, denies other neurological symptoms.

PAST MEDICAL HISTORY

Significant for Charcot-Marie-Tooth syndrome. This seems to run autosomal dominant pattern and was diagnosed in her mother as well as grandmother on the mother's side. She has one brother and one sister. Her sister age 37, is not affected. Her brother died at age 19 from an accident. She reports that the symptoms in her mother started in late 50's. While in Ms. McIntyre, the symptoms started at around age 8 and had surgery at age 2 and age 4 for deformities of the feet. She had surgery for hammertoes in 2001 and had toe surgery at age 15 and 18. Two weeks prior to this evaluation, she had right foot surgery.

CURRENT MEDICATIONS

She currently uses tramadol, gabapentin, omeprazole, calcium and vitamin supplements.

ALLERGIES

She is allergic to Requip and Vicodin.

SOCIAL HISTORY

Ms. McIntyre indicated that she has not worked since 2011. She does not smoke, and does not drink alcohol. She is able to drive but tends to take naps when driving long distances. She is a registered nurse by training.

PHYSICAL EXAMINATION

Ms. McIntyre was accompanied by her parents. Her stated height was 5 feet 6-1/2 inches. Her stated weight was 158 pounds. Ms. McIntyre was cognitively intact. Short-term memory was normal. She could recall 3/3 objects after 5-minute delay without difficulty. She could perform serial subtractions test without difficulty. She could also copy an intersecting pentagon figure and draw a clock face without difficulty. Cranial

RE: Melissa McIntyre

Page: 3

nerves examination was unremarkable. Visual fields were full to confrontation. Extraocular movements were full with no nystagmus or diplopia. Facial movement and sensation were intact and symmetrical. There was no facial asymmetry. The tongue and palate moved in midline. Upper extremity examination showed normal tone and muscle bulk. The power was 5/5 on the right side 5-/5 on the left side. Pinprick sensation was normally felt in the upper extremities. Two-point discrimination was less than 4 mm on the tips of all fingers. Tinel sign was negative at the wrists and elbows bilaterally. Lower extremity examination showed profound wasting in the legs and feet with toe flexion deformities and multiple scars from prior surgery. Calf circumference, 10 cm below the fibular head was 27 cm. Ms. McIntyre had a cast on the right side for recent surgery. Pinprick sensation was decreased up to knee level. Right lower extremity was not examined due to cost. Romberg sign was not tested.

REVIEW OF MEDICAL RECORDS

Surveillance report dated February 24, 2014. Surveillance report indicated surveillance on June 10, June 24, and June 25, 2015.

Mayo Clinic Health System records were reviewed from July 13, 2011, through July 6, 2011. July 13, 2011, note indicates an evaluation for complaints of fatigue. Past medical history was listed to include diagnosis of Charcot-Marie-Tooth, status post multiple surgeries to the feet as a child and jaw surgery as well as history of restless legs syndrome, treated with Neurontin. Past surgical history also included tonsillectomy and hemorrhoidectomy. Other complaints were chronic pain attributed to Charcot-Marie-Tooth. Reported that her work as a registered nurse was becoming increasingly difficult secondary to diagnosis of Charcot-Marie-Tooth syndrome. She reported persistent fatigue. Complete blood count and electrolytes were reported to be normal.

Occupation medicine evaluation on July 20, 2011, indicates an evaluation for difficulty with work due to Charcot-Marie-Tooth. Physical examination was reported to show Stork leg deformity, classic sign of Charcot-Marie-Tooth syndrome, inability to heel or toe walk, and inability to tandem gait without losing balance. Romberg sign was reported to be positive. There was no tenderness of paraspinal muscles. Strength of the upper extremities was 5-/5. Weakness of the lower extremities was also noted. Upper and lower extremity reflexes were described as 2/4 and symmetrical. Cranial nerves were intact. Cognitive testing was normal. She was released from work for seven days and to return to work thereafter with restrictions of avoiding patient lifting, transfers, and climbing ladders. Also given restrictions of lifting no more than 20 pounds. It was specifically stated that "she is interested in finding another position as

RE: Melissa McIntyre

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an R.N. that does not require her to do patient handling, which I support." She was advised to cut her position from full-time at 0.9 percent to 0.8.

Neurological consultation dated August 17, 2011, indicates an evaluation for a Charcot-Marie-Tooth syndrome. It was indicated that her mother as well as grandmother and great-grandmother from the mother's side were affected. Physical examination was reported. It was stated that Ms. McIntyre was born with club foot and had decreased tone in the lower extremities and had hammertoes and fused ankle joints. It was stated that she had two surgeries at age 2 to 4, started walking at age 2 to 3, and required braces. It was stated that in her 20s and early 30s, she was able to rock climb and Rollerblade; however, in mid 30s she started having more pain and more balance problems, and the year prior to evaluation noted marked impairment of balance. Also reported decreased dexterity of the upper extremities and dropping things. Also reported difficulty with texting, using a cellular phone. Medications listed to include tramadol, lorazepam, vitamin D, Prilosec, and Neurontin 300 mg in the morning and 600 mg at bedtime. Allergies were listed to include codeine and Requip. Physical examination reported to show bilateral drop feet, worse on the left compared to the right with 3- weakness of the right plantar flexion but 4- weakness on the left. It was indicated that there was no eversion or inversion. Noted 2- minus weakness of the intrinsic muscles of the hands bilaterally including the finger abductors, adductors, and extensor digitorum communis. Decreased sensation to pinprick up to the sock line to the knee with decreased vibration was also noted. Reflexes were reported to be hypoactive in the upper extremities but still present, normoactive at the knees, and absent on the right ankle but elicitable on the left. Cerebellar examination was unremarkable. Diagnosis of hereditary motor and sensory neuropathy (Charcot-Marie-Tooth). This was described as likely autosomal dominant consistent with Charcot-Marie-Tooth type 1A (demyelinating variant secondary to the PMP 22 gene duplication). EMG and nerve conduction studies were recommended. Genetic testing was also recommended. She was given vitamin supplements.

Endocrine consultation dated September 6, 2011, for complaints of fatigue listed diagnosis of hypersomnia, and sleep study was recommended.

She was seen again for neurological consultation on September 13, 2011. EMG was interpreted to show predominantly motor neuropathy with absent to low compound muscle action potentials involving the peroneal and tibial muscles bilaterally. Findings were interpreted to be consistent with hereditary motor and sensory neuropathy type II. Sensory nerve conduction studies were reported to be unremarkable. This was

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reported to be against PMP 22 gene duplication. She was advised to continue calcium and vitamin supplements and Co Q10.

Sleep study but was performed on September 22, 2011. It was reported to show no evidence for obstructive sleep apnea. Other diagnosis listed was periodic leg movement of sleep and restless legs syndrome. Pulmonary evaluation/Sleep Clinic records listed diagnosis of daytime slight hyper somnolence without evidence of obstructive sleep apnea. Second diagnosis was restless legs syndrome.

She was seen at occupational medicine on October 12, 2011. She was released to work eight-hour days, 24 hours per week in primarily seated position. Advised to avoid lifting or patient transfers.

She was seen again on December 27, 2011. The note indicated that Ms. McIntyre was no longer employed.

The Mayo Clinic records indicates follow-up neurology, and she was referred to physical therapy.

Started physical therapy July 31, 2013.

Continued follow-up at occupational health clinic.

She was seen with urinary tract symptoms on October 14, 2014.

She was seen for neurological follow-up on July 29, 2015. She had bilateral foot-drop. She was evaluated by Dr. Vanessa Tseng.

A report from Dr. Tseng dated March 14, 2016 indicates that Ms. McIntyre suffers from Charcot-Marie-Tooth disorder, a condition that limits her ability to physically function and provided extreme fatigue. Also reported chronic pain and fatigue, difficulty with concentrating. The report indicated that the disorder is progressive. Dr. Tseng opined that Ms. McIntyre cannot engage in any gainful employment, even in sedentary position due to her limitations.

Orthopaedic & Fracture Clinic records indicate follow-up from June 9, 2015, through September 11, 2015. The records indicate evaluation of right finger injury following a dog bite. Laceration of the right middle finger.

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SUMMARY

The findings and the medical records reviewed are consistent with the diagnosis of Charcot-Marie-Tooth (hereditary motor sensory neuropathy type II) with profound weakness, sensory loss and wasting of the lower extremity muscles and loss of balance. In my opinion, Ms. McIntyre is capable of performing sedentary jobs (office work with no tasks that require balance). Charcot-Marie-Tooth is a progressive disorder with no available effective treatment. As the disease progresses, recommendations such as using a motorized wheelchair may be required.

ANSWERS TO SPECIFIC QUESTIONS

1. *Please address all medical conditions currently impacting claimant's status as of 1/8/16.*

As of January 18, 2016, medical condition affecting Ms. McIntyre is Charcot-Marie-Tooth syndrome with profound weakness and wasting and sensory loss in the lower extremities with loss of balance.

2. *Please document and discuss primary and secondary diagnoses as of 7/20/11*

As of July 20, 2011, the primary diagnosis was that of Charcot-Marie-Tooth type II syndrome and restless legs syndrome. Other diagnosis listed in the medical records was chronic pain.

3. *Based on your review, is there medical data to substantiate the presence of subjective complaints as of 1/18/16? If so, please list.*

Complaints of fatigue likely contributed to by the loss of balance, lower extremity weakness, and sensory loss as well as medications for restless legs syndrome (Neurontin). Based on the medical records reviewed as well as today's examination, there are medical data to substantiate the subjective complaints as of January 18, 2016. As stated earlier, Charcot-Marie-Tooth is a progressive syndrome with worsening of symptoms over time.

4. *Please comment on current treatment plan. Is it reasonable and appropriate? Do you have any other treatment recommendations?*

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The current treatment plan is that of conservative treatment with use of AFOs, medications for restless legs syndrome, and surgery if required to correct deformities. There are currently no specific treatments for Charcot-Marie-Tooth syndrome. In my opinion, the treatment up to date has been reasonable and appropriate. I do not have any other treatment recommendations.

5. *What is the prognosis in this case?*

The prognosis is guarded. This is a progressive syndrome that worsens over the years.

6. *Please provide a detailed explanation regarding presence or absence of impairment as of 1/18/16. Please include references to medical records included in your review. Report must include the basis for your opinion.*

Please see above.

7. *Please advise if the claimant has work capacity on a full time consistent basis as of 1/18/16. NOTE - Gradual return to work is not an option. Please include the basis for your opinion:*

- *Lack of work function at any level of exertion.*
- *Sedentary - Exerting up to 10 pounds of force occasionally and/or a negligible amount of force frequently to lift, carry, push, pull, or otherwise move objects, including the human body. Sedentary work involves sitting most of the time, but may involve walking or standing for brief periods of time. For example, sitting for up to 1 hour, standing/stretching and resume sitting. Jobs are sedentary if walking and standing are required only occasionally and all other sedentary criteria are met.*
- *Light: Exerting up to 20 pounds of force occasionally, and/or 10 pounds of force frequently (one-third to two-thirds of the time), and for a negligible amount of force constantly (two-thirds or more of the time) to move objects. Physical demand requirements are in excess of those for Sedentary Work. Even though the weight lifted may be only a negligible amount, a job should be ruled Light work when it requires walking or standing to a significant degree, sitting most of the time, but entails pushing and/or pulling of arms or leg controls, and/or working at a production rate pace entailing the constant pushing and/or pulling of material even though the weight of those materials is negligible.*

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- *Medium - Exerting 20 to 50 pounds of force occasionally, and/or 10 to 25 pounds of force frequently, and/or greater than negligible up to 10 pounds of force constantly to move objects. Physical Demand requirements are in excess of those for Light Work*

Definitions of frequency -

Occasionally - Activity or condition exists up to 1/3 of the workday

Frequently - Activity or condition exists from 1/3 to 2/3 of the workday


Constantly - Activity or condition exists 2/3 or more of the workday

In my opinion, Ms. McIntyre is capable of working full time in a sedentary position as of January 18, 2016. In my opinion, Ms. McIntyre is capable of performing a sedentary job (exerting up to 10 pounds of force occasionally and/or negligible amount of force frequently to lift, carry, push, pull or otherwise move objects including the human body and sitting most of the time with the exception of limited walking and standing for more than brief periods of time).

8. *Please identify the claimant's current medications, and also indicate what, if any, side effects they can or do present, and how, if at all, said side effects can impact claimant's work function.*

She currently uses tramadol, gabapentin, omeprazole, calcium and vitamin supplements. Tramadol and gabapentin can cause drowsiness and fatigue

Sincerely,

A handwritten signature in black ink, appearing to read 'KB', followed by a long horizontal line extending to the right.

Khalafalla Bushara, M.D.
Board Certified Neurologist

RELIANCE STANDARD

Life Insurance Company

a DELPHI company

PHYSICAL CAPACITIES QUESTIONNAIRE

Name Melissa McIntyre

Date 12/16/2016

Date of Birth Redacted

Claim Number 22616002684

S. S. Number

Return to:

The purpose of this form is to help us determine the clinical condition of this individual. It is necessary for us to document functional impairment. Please reflect the patient's ability to perform these activities on a regular basis in an 8-hour workday.

	NOT AT ALL	Occasional 33% or Less	Frequent 34%-66%	Continuously 67%-100%
Sit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Stand	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walk	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bend at waist	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Squat at knees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climb - stairs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climb - ladders	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kneel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crawl	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Use Foot controls	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drive	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The patient can work at the following exertional level(s).

- ☒ Sedentary Lift – Exerting up to 10 pounds of force occasionally, and/or a negligible amount of force frequently.
- ☐ Light Lift – Exerting up to 20 pounds of force occasionally, and/or up to 10 pounds of force frequently, and/or a negligible amount of force constantly
- ☐ Medium Lift – Exerting 20-50 pounds of force occasionally, and/or 10-25 pounds of force frequently, and/or a negligible up to 10 pounds amount of force constantly
- ☐ Heavy Lift – Exerting 50-100 pounds of force occasionally, and/or 25-50 pounds of force frequently, and/or 10-20 pounds amount of force constantly
- ☐ Very Heavy Lift – Exerting in excess of 100 pounds of force occasionally, and/or in excess of 50 pounds of force frequently, and/or in excess of 20 pounds amount of force constantly

(Please Complete Next Page)

Claimant's Name Melissa McIntyreDate 12/16/2016

Please Circle Dominant Hand:

RIGHT

LEFT

The patient can use their **RIGHT** upper extremity for:

	NOT AT ALL	Occasional 33% or Less	Frequent 34%-66%	Continuously 67%-100%
Simple Grasping	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Reach above mid chest	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Reach at waist/desk level	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Pushing/Pulling	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fine Manipulation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Feeling/tactile sensation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

The patient can use their **LEFT** upper extremity for:

	NOT AT ALL	Occasional 33% or Less	Frequent 34%-66%	Continuously 67%-100%
Simple Grasping	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Reach above mid chest	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Reach at waist/desk level	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Pushing/Pulling	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fine Manipulation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Feeling/tactile sensation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Date of Last Examination 12/3/2016

Any other factors affecting the patient's physical abilities?

Any person who knowingly and with intent to injure, defraud or deceive Reliance Standard Life Insurance Company, files a statement of claim or submits any information in conjunction with a claim containing fraudulent, false, misleading, incomplete or deceptive information commits a fraudulent insurance act, which is a crime. These actions will result in the denial of the claim, and are subject to prosecution under state and/or federal law. Reliance Standard Life Insurance Company will cooperate fully with any prosecution and will seek any and all appropriate legal remedies.

Signature KBDate 12/16/2016

EF-1165

RSL001270

Khalafala Bushara, MD

Degree/Specialty Neurology

Name of health care provider completing this form (please print)

EF-1165

RSL001271

**Khalafalla O. Bushara, M.D.
Curriculum Vitae**

EDUCATION

Faculty of Medicine	October 1988
University of Khartoum	
Sudan	
M.D., B.S.	

CERTIFICATION

Royal College of Physicians of the UK (MRCP-UK)	November 1991
London, UK	

American Board of Neurology and Psychiatry	January 1999
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AWARDS

Bob Allison Ataxia Research Foundation	2003
Veteran Affairs Administration Merit Review Grant	2002, 2006, 2011
Minnesota Medical Foundation	2001
Francis M. Foster Award (Wisconsin Neurological Society)	1994

MEDICAL LICENSE

Minnesota – No.44165 (active)
Washington, D.C. – No. MD31989 (inactive)
Wisconsin – No. 36831(inactive)
General Medical Council (UK) – No. 91/2415 (inactive)

CURRENT HOSPITAL PRIVILEGES

Minneapolis VA Medical Center
University Medical Center, Fairview
University Medical Center, Fairview -Riverside
Fairview Ridges Hospital

EXPERIENCE

Professor of Neurology	2014 to Present
University of Minnesota	

Associate Professor of Neurology	2007 to 2014
University of Minnesota	

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Assistant Professor of Neurology University of Minnesota	2000 to 2007
Staff Physician, Neurology Service Minneapolis VA Medical Center	2000 to Present
Senior Staff Fellow, Human Motor Control Section (movement disorders and neuro-imaging) Medical Neurology Branch, NINDS, NIH Bethesda, Maryland	1997 - 2000
Neurology Resident University of Wisconsin Hospitals and Clinics Madison, Wisconsin	1994 - 1997
Neurology Research Registrar Southend General Hospital, UK	1993 - 1994
Senior House-Officer in Neurosurgery Dundee Royal Infirmary University of Dundee, Scotland	1992 - 1993
Senior House-Officer in Neurology Dundee Royal Infirmary University of Dundee, Scotland	1993 - 1993
Senior House-Officer Internal Medicine University of Southampton Hospital Southampton, UK	1991 - 1992
Senior House-Officer in Internal Medicine Khartoum Teaching Hospital, Sudan	1990 - 1991
Junior House-Officer Khartoum Teaching Hospital, Sudan	1989 - 1991

PUBLICATIONS***Peer Reviewed Papers***

1. R. Y. Lo, K. P. Figueroa, S. M. Pulst, S. Perlman, G. Wilmot, C. Gomez, J. Schmahmann, H. Paulson, V. G. Shakkottai, S. Ying, T. Zesiewicz, K. Bushara, M. Geschwind, G. Xia, J. T. Yu, L. E. Lee, T. Ashizawa, S. H. Subramony, and S. H. Kuo, "Depression and clinical progression in spinocerebellar ataxias," *Parkinsonism & related disorders* 22, 87-92 (2016);

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3. R. Y. Lo, K. P. Figueroa, S. M. Pulst, C. Y. Lin, S. Perlman, G. Wilmot, C. Gomez, J. Schmahmann, H. Paulson, V. G. Shakkottai, S. Ying, T. Zesiewicz, K. Bushara, M. Geschwind, G. Xia, S. H. Subramony, T. Ashizawa, and S. H. Kuo, "Coenzyme Q10 and spinocerebellar ataxias," *Movement disorders* 30 (2), 214-220 (2015);
4. Moscovich M, Okun MS, Favilla C, Figueroa KP, Pulst SM, Perlman S, Wilmot G, Gomez C, Schmahmann J, Paulson H, Shakkottai V, Ying S, Zesiewicz T, Kuo SH, Mazzoni P, Bushara K, Xia G, Ashizawa T, Subramony SH (2014) Clinical Evaluation of Eye Movements in Spinocerebellar Ataxias: A Prospective Multicenter Study. *J Neuroophthalmol.* 35 (1), 16-21 (2015)
5. M. Bares, R. Apps, Z. Kikinis, D. Timmann, G. Oz, J. J. Ashe, M. Loft, S. Koutsikou, N. Cerminara, K. O. Bushara, and T. Kasperek, "Proceedings of the workshop on Cerebellum, Basal Ganglia and Cortical Connections Unmasked in Health and Disorder held in Brno, Czech Republic, October 17th, 2013," *Cerebellum* 14 (2), 142-150 (2015);
6. T. Ashizawa, K. P. Figueroa, S. L. Perlman, C. M. Gomez, G. R. Wilmot, J. D. Schmahmann, S. H. Ying, T. A. Zesiewicz, H. L. Paulson, V. G. Shakkottai, K. O. Bushara, S. H. Kuo, M. D. Geschwind, G. Xia, P. Mazzoni, J. P. Krischer, D. Cuthbertson, A. R. Holbert, J. H. Ferguson, S. M. Pulst, and S. H. Subramony, "Clinical characteristics of patients with spinocerebellar ataxias 1, 2, 3 and 6 in the US; a prospective observational study," *Orphanet journal of rare diseases* 8, 177 (2013).
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45. **Bushara KO**, Park DM, Jones JC, Schutta HS. Botulinum toxin--a possible new treatment for axillary hyperhidrosis. *Clin Exp Dermatol* 1996;21(4):276-278.
46. **Bushara KO**, Petermann G, Wacławik AJ, Brown WD, Schutta HS. Sarcoidosis of the spinal cord with extensive vertebral involvement: A case report. *Comput Med Imaging Graph* 1995;19(5):443-446.
47. **Bushara KO**, Park DM. Botulinum toxin and sweating. *J Neurol Neurosurg Psychiatry* 1994;57(11):1437-1438.

Non-peer reviewed publications

1. **Bushara, K.**, 2013. We cannot cure ataxia, we can only eradicate it. *JAMA Neurol* 70, 1099.
2. **Bushara KO**. Neurologic presentation of celiac disease. *Gastroenterology* 2005; 128: S92-7.
3. Brooks BR, **Bushara K**, Khan A, Hershberger J, Wheat JO, Belden D, Henningsen H. Functional magnetic resonance imaging (fMRI) clinical studies in ALS--paradigms, problems and promises. *Amyotroph Lateral Scler Other Motor Neuron Disord* 2000;1 Suppl 2:S23-32.

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Hallett M, Sadato N, Honda M, Ishii K, Waldvogel D, **Bushara KO**. Functional MRI of Sensorimotor System. In: *Functional MRI* (Moonen C and Bandettini PA; eds) New York, Springer, 1999.

Patient Education Material

Bushara KO. *What is Ataxia?* (Booklet) University of Minnesota, 2006.

Khalafalla O. Bushara, M.D.

Curriculum Vitae
Page 7

Reviewer

Ad hoc reviewer: *Annals of Neurology**, *Brain**, *Cerebral Cortex**, *Nature Neuroscience**, *NeuroImage**, *Journal of Neurophysiology*, *The Lancet**, *Trends In Cognitive Neuroscience*. (* Multiple reviews).
Member of proposals review panel: US Army Neurotoxin Exposure Treatment Research Program (NETRP) on the subject area of "Early Detection and New Therapeutic Strategies". November, 2000.

Reviewer, US Army Medical Research and Materiel Command (USAMRMC). November, 2001.

Reviewer, National Science Foundation.

Member, Expert Panel. National Consensus on Celiac Disease, June 2004

PRESENTATIONS

1. Cerebellar Ataxia. *Occupational Therapy Program*. The University Of Minnesota. December 2007.
2. Functional MRI of the inferior olive. *Neurology Grand Rounds*, University of Minnesota, July 2006.
3. Effect of Levetiracetam on Essential Tremor. *Neurology Grand Rounds*, University of Minnesota, Nov 2004.
4. Alcohols and Essential Tremor. *Neurology Grand Rounds*, University of Minnesota, Nov 2003.
5. Octanol for Essential Tremor. A double-blind, placebo-controlled trial *International Conference of Parkinson's Disease and Movement Disorders*, Miami, Florida, Nov 2002.
6. Gluten sensitivity In Huntington's Disease. *International Conference of Parkinson's Disease and Movement Disorders*, Miami, Florida, Nov 2002.
7. Open-label trial of gluten-free diet in sporadic and hereditary cerebellar ataxia with gluten sensitivity. *International Conference of Parkinson's Disease and Movement Disorders*, Miami, Florida, Nov 2002.
8. Cerebellar Ataxia and Gluten Sensitivity. *Neurology Grand Rounds*, University of Minnesota, Jan 2002.
9. Neural Correlates of Cross-modal Timing. *Brain Sciences Center Seminar*, Minneapolis VA Medical Center. October 2000.
10. Modality-Specific Frontal And Parietal Areas For Auditory and Visual Spatial localization In Humans. *Society of Neuroscience, 28th Annual meeting*, Los Angeles, Nov 1998.
11. Multiple Somatotopic Representations Of The Tactile Projections To The Intermediate Cerebellum In Humans. *American Neurological Association Annual Meeting*, Oct 1998, San Diego.
12. Decreased cortical activation to sensory stimulation in Amyotrophic Lateral Sclerosis; a functional magnetic resonance imaging study. *American Academy of Neurology 49th Annual Meeting*, Boston, April 1997.
13. Botulinum toxin and sweating. *The international conference on botulinum toxin*, Munich, Germany in June 1995.
14. The anhidrotic effect of botulinum toxin. *American Academy of Neurology Annual Meeting*, Seattle May 1995.
15. Botulinum toxin and sweating. *Wisconsin Neurological Society Annual Meeting*, Door County, WI, Oct 1994.

Invited Presentations

Khalafalla O. Bushara, M.D.

Curriculum Vitae
Page 8

"Cerebellar Ataxia and Allergy to Wheat". National Ataxia Foundation Annual Meeting. Memphis, Tennessee, March, 2007.

"Neurological/Psychological Presentation of Celiac Disease: Ataxia, Depression, Neuropathy, Seizures, and Autism". *NIH Consensus Development Conference on Celiac Disease*. National Institutes of Health, Bethesda, Maryland, June 28–30, 2004.

"Sensory representation in the human cerebellum". Neurology Grand Rounds, Howard University, Washington DC, March 1, 2000.

"Ataxia With Positive Celiac Antibodies." National Ataxia Foundation-Chesapeake Chapter Annual Meeting, Bethesda, Maryland, Jan 2000.

ABSTRACTS

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Oishi N, Mima T, Ishii K, Bushara KO, Hiraoka T, Ueki Y, Fukuyama H, and Hallett M. Neural Correlates Of Regional Electroencephalogram Power Change. *Neuroscience Abstracts*, 2005.

Xu D, Liu T, Ashe J, and Bushara K. Neural Correlates of Perception and Motor Performance of Rhythm. *NeuroImage* 2005, 26 (Suppl 1): 67.

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Khalafalla O. Bushara, M.D.

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Bushara KO, Jones JC, Park DM, Schutta HS. Botulinum toxin and sweating. *Movement Disorders* 1995;10 (3):391.

From: Kevin Foley <Kevin.Foley@rsli.com>
Sent: Tuesday, March 4, 2014 10:20 AM
To: Bracey, Corrine
Subject: McIntyre #2011-09-27-0051-LTD-01

Hi Corrine,

When you have a moment (no rush), can we discuss the above referenced claimant? Appears surveillance is warranted but wanted to bounce some ideas off of you first.

Thanks!
Kevin

Kevin P. Foley

Kevin P. Foley, LTD Claims
Reliance Standard Life Insurance Co.
2001 Market Street
Philadelphia, PA 19103
1-800-351-7500, ext. 3708
Fax: 267-256-3535

From: Kevin Foley <Kevin.Foley@rsli.com>
Sent: Monday, December 8, 2014 2:12 PM
To: Bracey, Corrine
Subject: Re: Melissa McIntyre/2011-09-27-0051-LTD-01

Hi Corrine,

Updated auth and list of treating providers are on file. Sent medical records requests to listed providers.

Thanks,
Kevin

Kevin P. Foley

Kevin P. Foley, LTD Claims
Reliance Standard Life Insurance Co.
2001 Market Street
Philadelphia, PA 19103
1-800-351-7500, ext. 3708
Fax: 267-256-3535

>>> Corrine Bracey 12/8/2014 1:13 PM >>>
Kevin,

It appears you have not updated the claims since 7/11/14. Please update medicals and update the claim notes.

Corrine Bracey, Supervisor
Long Term Disability Claims Department
Reliance Standard Life Insurance Company
2001 Market Street
Suite 1500
Philadelphia, PA 19103-7090
Ph# 800-351-7500, ext. 3878
Fax# 267-256-4262
corrine.bracey@rsli.com

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From: Kevin Foley <Kevin.Foley@rsli.com>
Sent: Tuesday, February 3, 2015 11:17 AM
To: Bracey, Corrine
Subject: Fwd: Melissa McIntyre 2011-09-27-0051-LTD-01

Hi Corrine,

Per e-mail from CE below, I would to request for a RUSH medical review regarding above claimant.

Payments are due for the claimant and we have recently received the requested medical records. Please advise is a rush review is possible.

Currently tasked to Heather DiFalco (completed previous AO review on this claim) with a RUSH request for 2/4/15

Thank you,
Kevin

Kevin P. Foley

Kevin P. Foley, LTD Claims
Reliance Standard Life Insurance Co.
2001 Market Street
Philadelphia, PA 19103
1-800-351-7500, ext. 3708
Fax: 267-256-3535

>>> Elijah Wayda 2/3/2015 11:06 AM >>>
Hey Kev,

This woman has emailed me and called me regarding the status of her claim. Up to 12/18/2014, I was releasing benefits month by month while the AO investigation was ongoing. Martha mentioned after that last check that she wouldn't release any additional benefits until it was done. I just opened the claim and saw that the AO review is due on 2/5/2015. Is this correct? She just told me that she had to "move money around to pay for mortgage" and she needs a check soon. She requested a rush on the review. I don't know what could be done at this point. Do you have any direction I should go in?

Let me know when you get a chance. Thank you.

Elijah Wayda
Reliance Standard Life Insurance Company

Long Term Disability Claims
Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500
(tel:18003517500) ext 4705
fax: 267-256-3535
(tel:2672563535)
elijah.wayda@rsli.com

From: DiFalco, Heather <Heather.DiFalco@rsli.com>
Sent: Tuesday, February 3, 2015 12:39 PM
To: Bracey, Corrine
Cc: Kevin Foley
Subject: Re: (RUSH) Melissa McIntyre 2011-09-27-0051-LTD-01

Hi,
I was planning on getting into the claim just as soon as I complete the review I am in. I will email everyone when it is done. Thank you,

Heather DiFalco, RN
Nurse Case Manager
First Reliance Standard Life Insurance Company
7 Skyline Drive
Hawthorne, NY 10532
800-559-0954 X 40272
fax: 914-784-0024
heather.difalco@rsli.com>>> Corrine Bracey 2/3/2015 12:36 PM >>> Hi Heather

We have a customer service issue on the claim above.

Please conduct a rush AO medical review on the claim above ASAP. A rush task has been set for 2/4/15.

Thank you.

Corrine D. Bracey
Supervisor, LTD Claims Department
Reliance Standard Life Insurance Co.
2001 Market Street
Suite 1500
Philadelphia, PA 19103-7090
Ph# 800-351-7500, ext. 3878
Fax# 267-256-4262
corrine.bracey@rsli.com

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Thank you,
Kevin

Kevin P. Foley

Kevin P. Foley, LTD Claims
Reliance Standard Life Insurance Co.
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Long Term Disability Claims
Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500 (tel:18003517500) ext 4705
fax: 267-256-3535 (tel:2672563535)
elijah.wayda@rsl.com

From: DiFalco, Heather <Heather.DiFalco@rsli.com>
Sent: Tuesday, February 3, 2015 1:40 PM
To: Bracey, Corrine
Cc: Kevin Foley
Subject: Re: (RUSH) Melissa McIntyre 2011-09-27-0051-LTD-01

Hi,
the review is done

Heather DiFalco, RN
Nurse Case Manager
First Reliance Standard Life Insurance Company
7 Skyline Drive
Hawthorne, NY 10532
800-559-0954 X 40272
fax: 914-784-0024
heather.difalco@rsli.com>>> Corrine Bracey 2/3/2015 12:36 PM >>> Hi Heather

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Kevin

Kevin P. Foley

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Reliance Standard Life Insurance Co.
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fax: 267-256-3535 (tel:2672563535)
elijah.wayda@rsli.com

From: Kevin Foley <Kevin.Foley@rsli.com>
Sent: Tuesday, February 3, 2015 1:41 PM
To: Bracey, Corrine; DiFalco, Heather
Subject: Re: (RUSH) Melissa McIntyre 2011-09-27-0051-LTD-01

Thank you, Heather!

Kevin P. Foley

Kevin P. Foley, LTD Claims
Reliance Standard Life Insurance Co.
2001 Market Street
Philadelphia, PA 19103
1-800-351-7500, ext. 3708
Fax: 267-256-3535

>>> Heather DiFalco 2/3/2015 1:40 PM >>>
Hi,
the review is done

Heather DiFalco, RN
Nurse Case Manager
First Reliance Standard Life Insurance Company
7 Skyline Drive
Hawthorne, NY 10532
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Kevin

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Elijah Wayda
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Long Term Disability Claims

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office: 1-800-351-7500
(tel:18003517500) ext 4705
fax: 267-256-3535
(tel:2672563535)
elijah.wayda@rsli.com

From: Veasey, Michael <Michael.Veasey@rsli.com>
Sent: Wednesday, July 8, 2015 4:01 PM
To: Bracey, Corrine
Subject: Possible Peer Review?

Hi Corrine,

Could you have a look at the RNR, updated meds, and surveillance report for claim 2011-09-27-0051-LTD-01? I feel this might be a good candidate for Dr. Parke to take a look at, let me know what you think.

Regards,

Michael Veasey

Reliance Standard Life Insurance
2001 Market St., Suite 1500
Philadelphia, PA 19103
Michael.Veasey@RSLI.com
Toll Free: 800-351-7500
(tel:8003517500) ext. 3890
Direct Line: (267) 256-3890
Fax: (267) 256-4262
(tel:2672564262)

From: Scott, Timothy <Timothy.Scott@rsli.com>
Sent: Wednesday, December 16, 2015 12:07 PM
To: Bracey, Corrine
Subject: Melissa McIntyre 2011-09-27-0051-LTD-01 (Denial)

Hello Corrine,

I have referred this claim for AO Denial per the RNR yesterday (REA today).

Thanks.

Timothy Snipes Scott
AO/WOP Claims Examiner
Reliance Standard Life Insurance
2001 Market Street, Suite 1500
Philadelphia, PA 19017-7090
Phone: 1-800-351-7500 ext 3890

Email Contact: timothy.scott@rsli.com

From: Scott, Timothy <Timothy.Scott@rsli.com>
Sent: Friday, January 29, 2016 2:24 PM
To: Bracey, Corrine
Subject: URGENT: Melissa McIntyre 2011-09-27-0051-LTD-01

Importance: High

Hello Corrine,

I am in the process of drafting the denial letter for the above-mentioned claimant and noticed that another LTD benefits check should be issued to the closure letter has yet to be sent. We last paid the claimant on 12/18/2015. I have set up another WS (#37) to pay the claimant to 01/18/2016. Can you please approve the issuance of one (1) additional month's worth of LTD benefits to pay the claimant to current and allow for completion of the letter.

Also, can you please re-close the claim file Status 63: Not TD AO [I had to temporarily re-open the file to create the new WS]. Thank you.

Timothy Snipes Scott
AO/WOP Claims Examiner
Reliance Standard Life Insurance
2001 Market Street, Suite 1500
Philadelphia, PA 19017-7090
Phone: 1-800-351-7500 ext 3890

Email Contact: timothy.scott@rsli.com

From: Strickler, Susan <Susan.Strickler@rsli.com>
Sent: Thursday, December 22, 2016 3:56 PM
To: Scott, Timothy
Cc: Bracey, Corrine
Subject: uphold Melissa McIntyre 2011-09-27-0051-LTD-01

Hi Tim,

I am upholding your decision to terminate benefits on the above claimant.

For further explanation, please see my rationale in the appeal comments and uphold letter.

Corrine, please make sure the LTD claim is placed in the correct closure status codes.

Thanks!

Susan Strickler, HCAFA
Senior Benefits Analyst
Po Box 8330
Philadelphia PA 19103
Pn# 800-351-7500 x 4267
Fax# 267-256-3514

From: Bracey, Corrine <Corrine.Bracey@rsli.com>
Sent: Tuesday, March 4, 2014 10:20 AM
To: Kevin Foley
Subject: Re: McIntyre #2011-09-27-0051-LTD-01

Sure, come on over.

Corrine Bracey, Supervisor
Long Term Disability Claims Department
Reliance Standard Life Insurance Company
2001 Market Street
Suite 1500
Philadelphia, PA 19103-7090
Ph# 800-351-7500, ext. 3878
Fax# 267-256-4262
corrine.bracey@rsli.com

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>>> Kevin Foley 3/4/2014 10:19 AM >>>

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Thanks!
Kevin

Kevin P. Foley

Kevin P. Foley, LTD Claims
Reliance Standard Life Insurance Co.
2001 Market Street
Philadelphia, PA 19103
1-800-351-7500, ext. 3708
Fax: 267-256-3535

From: Bracey, Corrine <Corrine.Bracey@rsli.com>
Sent: Tuesday, March 4, 2014 10:20 AM
To: Kevin Foley
Subject: Re: McIntyre #2011-09-27-0051-LTD-01

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Corrine Bracey, Supervisor
Long Term Disability Claims Department
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>>> Kevin Foley 3/4/2014 10:19 AM >>>

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Thanks!
Kevin

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Reliance Standard Life Insurance Co.
2001 Market Street
Philadelphia, PA 19103
1-800-351-7500, ext. 3708
Fax: 267-256-3535

From: Bracey, Corrine <Corrine.Bracey@rsli.com>
Sent: Monday, December 8, 2014 1:14 PM
To: Kevin Foley
Subject: Melissa McIntyre/2011-09-27-0051-LTD-01

Kevin,

It appears you have not updated the claims since 7/11/14. Please update medicals and update the claim notes.

Corrine Bracey, Supervisor
Long Term Disability Claims Department
Reliance Standard Life Insurance Company
2001 Market Street
Suite 1500
Philadelphia, PA 19103-7090
Ph# 800-351-7500, ext. 3878
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corrine.bracey@rsli.com

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From: Bracey, Corrine <Corrine.Bracey@rsli.com>
Sent: Monday, December 8, 2014 2:15 PM
To: Kevin Foley
Subject: Re: Melissa McIntyre/2011-09-27-0051-LTD-01

Thanks

Corrine Bracey, Supervisor
Long Term Disability Claims Department
Reliance Standard Life Insurance Company
2001 Market Street
Suite 1500
Philadelphia, PA 19103-7090
Ph# 800-351-7500, ext. 3878
Fax# 267-256-4262
corrine.bracey@rsli.com

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>>> Kevin Foley 12/8/2014 2:12 PM >>>

Hi Corrine,

Updated auth and list of treating providers are on file. Sent medical records requests to listed providers.

Thanks,
Kevin

Kevin P. Foley

Kevin P. Foley, LTD Claims
Reliance Standard Life Insurance Co.
2001 Market Street
Philadelphia, PA 19103
1-800-351-7500, ext. 3708
Fax: 267-256-3535

>>> Corrine Bracey 12/8/2014 1:13 PM >>>

Kevin,

It appears you have not updated the claims since 7/11/14. Please update medicals and update the claim notes.

Corrine Bracey, Supervisor
Long Term Disability Claims Department
Reliance Standard Life Insurance Company
2001 Market Street
Suite 1500
Philadelphia, PA 19103-7090
Ph# 800-351-7500, ext. 3878
Fax# 267-256-4262
corrine.bracey@rsl.com

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From: Bracey, Corrine <Corrine.Bracey@rsli.com>
Sent: Tuesday, February 3, 2015 12:15 PM
To: Kevin Foley
Subject: Re: Fwd: Melissa McIntyre 2011-09-27-0051-LTD-01

Hi Kevin,

I agree that the claim should be sent for a rush AO review, however please send the task to your AO nurse-Mary Kay, correct?

Corrine D. Bracey
Supervisor, LTD Claims Department
Reliance Standard Life Insurance Co.
2001 Market Street
Suite 1500
Philadelphia, PA 19103-7090
Ph# 800-351-7500, ext. 3878
Fax# 267-256-4262
corrine.bracey@rsli.com

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>>> Kevin Foley 2/3/2015 11:17 AM >>>

Hi Corrine,

Per e-mail from CE below, I would to request for a RUSH medical review regarding above claimant.

Payments are due for the claimant and we have recently received the requested medical records. Please advise is a rush review is possible.

Currently tasked to Heather DiFalco (completed previous AO review on this claim) with a RUSH request for 2/4/15

Thank you,
Kevin

Kevin P. Foley

Kevin P. Foley, LTD Claims
Reliance Standard Life Insurance Co.
2001 Market Street
Philadelphia, PA 19103
1-800-351-7500, ext. 3708

Fax: 267-256-3535

>>> Elijah Wayda 2/3/2015 11:06 AM >>>

Hey Kev,

This woman has emailed me and called me regarding the status of her claim. Up to 12/18/2014, I was releasing benefits month by month while the AO investigation was ongoing. Martha mentioned after that last check that she wouldn't release any additional benefits until it was done. I just opened the claim and saw that the AO review is due on 2/5/2015. Is this correct? She just told me that she had to "move money around to pay for mortgage" and she needs a check soon. She requested a rush on the review. I don't know what could be done at this point. Do you have any direction I should go in?

Let me know when you get a chance. Thank you.

Elijah Wayda
Reliance Standard Life Insurance Company
Long Term Disability Claims
Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500 (tel:18003517500) ext 4705
fax: 267-256-3535 (tel:2672563535)
elijah.wayda@rsli.com

From: Bracey, Corrine <Corrine.Bracey@rsli.com>
Sent: Tuesday, February 3, 2015 12:37 PM
To: DiFalco, Heather
Cc: Kevin Foley
Subject: (RUSH) Melissa McIntyre 2011-09-27-0051-LTD-01

Hi Heather

We have a customer service issue on the claim above.

Please conduct a rush AO medical review on the claim above ASAP. A rush task has been set for 2/4/15.

Thank you.

Corrine D. Bracey
Supervisor, LTD Claims Department
Reliance Standard Life Insurance Co.
2001 Market Street
Suite 1500
Philadelphia, PA 19103-7090
Ph# 800-351-7500, ext. 3878
Fax# 267-256-4262
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>>> Kevin Foley 2/3/2015 11:17 AM >>>

Hi Corrine,

Per e-mail from CE below, I would to request for a RUSH medical review regarding above claimant.

Payments are due for the claimant and we have recently received the requested medical records. Please advise is a rush review is possible.

Currently tasked to Heather DiFalco (completed previous AO review on this claim) with a RUSH request for 2/4/15

Thank you,
Kevin

Kevin P. Foley

Kevin P. Foley, LTD Claims

Reliance Standard Life Insurance Co.
2001 Market Street
Philadelphia, PA 19103
1-800-351-7500, ext. 3708
Fax: 267-256-3535

>>> Elijah Wayda 2/3/2015 11:06 AM >>>
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Elijah Wayda
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Philadelphia, PA 19103
office: 1-800-351-7500 (tel:18003517500) ext 4705
fax: 267-256-3535 (tel:2672563535)
elijah.wayda@rsli.com

From: Bracey, Corrine <Corrine.Bracey@rsli.com>
Sent: Tuesday, February 3, 2015 12:48 PM
To: DiFalco, Heather
Subject: Re: (RUSH) Melissa McIntyre 2011-09-27-0051-LTD-01

Thank you!

Corrine D. Bracey
Supervisor, LTD Claims Department
Reliance Standard Life Insurance Co.
2001 Market Street
Suite 1500
Philadelphia, PA 19103-7090
Ph# 800-351-7500, ext. 3878
Fax# 267-256-4262
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>>> Heather DiFalco 2/3/2015 12:39 PM >>>

Hi,

I was planning on getting into the claim just as soon as I complete the review I am in. I will email everyone when it is done. Thank you,

Heather DiFalco, RN
Nurse Case Manager
First Reliance Standard Life Insurance Company
7 Skyline Drive
Hawthorne, NY 10532
800-559-0954 X 40272
fax: 914-784-0024
heather.difalco@rsli.com>>> Corrine Bracey 2/3/2015 12:36 PM >>> Hi Heather

We have a customer service issue on the claim above.

Please conduct a rush AO medical review on the claim above ASAP. A rush task has been set for 2/4/15.

Thank you.

Corrine D. Bracey
Supervisor, LTD Claims Department
Reliance Standard Life Insurance Co.

2001 Market Street
Suite 1500
Philadelphia, PA 19103-7090
Ph# 800-351-7500, ext. 3878
Fax# 267-256-4262
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>>> Kevin Foley 2/3/2015 11:17 AM >>>

Hi Corrine,

Per e-mail from CE below, I would to request for a RUSH medical review regarding above claimant.

Payments are due for the claimant and we have recently received the requested medical records. Please advise is a rush review is possible.

Currently tasked to Heather DiFalco (completed previous AO review on this claim) with a RUSH request for 2/4/15

Thank you,
Kevin

Kevin P. Foley

Kevin P. Foley, LTD Claims
Reliance Standard Life Insurance Co.
2001 Market Street
Philadelphia, PA 19103
1-800-351-7500, ext. 3708
Fax: 267-256-3535

>>> Elijah Wayda 2/3/2015 11:06 AM >>>

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Let me know when you get a chance. Thank you.

Elijah Wayda
Reliance Standard Life Insurance Company
Long Term Disability Claims
Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500 (tel:18003517500) ext 4705
fax: 267-256-3535 (tel:2672563535)
elijah.wayda@rsli.com

From: Bracey, Corrine <Corrine.Bracey@rsli.com>
Sent: Thursday, July 9, 2015 2:15 PM
To: Veasey, Michael
Subject: Re: Possible Peer Review?

Hi Michael,

Please contact the claimant and confirm she has treated with her physicians this year. We only have medical on file to 11/14.

If the claimant treated, please update the medicals prior to our referral to PDA. If the claimant has not treated, we will refer the claim to Dr. Parke for a physician consult review and inform her of the same.

Thank you.

Corrine D. Bracey
Supervisor, LTD Claims Department
Reliance Standard Life Insurance Co.
2001 Market Street
Suite 1500
Philadelphia, PA 19103-7090
Ph# 800-351-7500, ext. 3878
Fax# 267-256-4262
corrine.bracey@rsli.com

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>>> Michael Veasey 7/8/2015 4:00 PM >>>
Hi Corrine,

Could you have a look at the RNR, updated meds, and surveillance report for claim 2011-09-27-0051-LTD-01? I feel this might be a good candidate for Dr. Parke to take a look at, let me know what you think.

Regards,

Michael Veasey

Reliance Standard Life Insurance
2001 Market St., Suite 1500
Philadelphia, PA 19103

Michael.Veasey@RSLI.com
Toll Free: 800-351-7500
(tel:8003517500) ext. 3890
Direct Line: (267) 256-3890
Fax: (267) 256-4262
(tel:2672564262)

From: Bracey, Corrine <Corrine.Bracey@rsli.com>
Sent: Wednesday, December 16, 2015 2:14 PM
To: Scott, Timothy
Subject: Re: Melissa McIntyre 2011-09-27-0051-LTD-01 (Denial)

Completed.

Thank you Tim!

Corrine D. Bracey
Supervisor, LTD Claims Department
Reliance Standard Life Insurance Co.
2001 Market Street
Suite 1500
Philadelphia, PA 19103-7090
Ph# 800-351-7500, ext. 3878
Fax# 267-256-4262
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>>> Timothy Scott 12/16/2015 12:06 PM >>>
Hello Corrine,

I have referred this claim for AO Denial per the RNR yesterday (REA today).

Thanks.

Timothy Snipes Scott
AO/WOP Claims Examiner
Reliance Standard Life Insurance
2001 Market Street, Suite 1500
Philadelphia, PA 19017-7090
Phone: 1-800-351-7500 ext 3890

Email Contact: timothy.scott@rsli.com

From: Bracey, Corrine <Corrine.Bracey@rsli.com>
Sent: Friday, January 29, 2016 3:21 PM
To: Scott, Timothy
Subject: Re: URGENT: Melissa McIntyre 2011-09-27-0051-LTD-01

Completed.

Corrine D. Bracey
Supervisor, LTD Claims Department
Reliance Standard Life Insurance Co.
2001 Market Street
Suite 1500
Philadelphia, PA 19103-7090
Ph# 800-351-7500, ext. 3878
Fax# 267-256-4262
corrine.bracey@rsli.com

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>>> Timothy Scott 1/29/2016 2:24 PM >>>

Hello Corrine,

I am in the process of drafting the denial letter for the above-mentioned claimant and noticed that another LTD benefits check should be issued to the closure letter has yet to be sent. We last paid the claimant on 12/18/2015. I have set up another WS (#37) to pay the claimant to 01/18/2016. Can you please approve the issuance of one (1) additional month's worth of LTD benefits to pay the claimant to current and allow for completion of the letter.

Also, can you please re-close the claim file Status 63: Not TD AO [I had to temporarily re-open the file to create the new WS]. Thank you.

Timothy Snipes Scott
AO/WOP Claims Examiner
Reliance Standard Life Insurance
2001 Market Street, Suite 1500
Philadelphia, PA 19017-7090
Phone: 1-800-351-7500 ext 3890

Email Contact: timothy.scott@rsli.com

From: Bracey, Corrine <Corrine.Bracey@rsli.com>
Sent: Thursday, February 4, 2016 3:42 PM
To: Scott, Timothy
Subject: Re: Redacted

Hi Tim,

I will review this tomorrow morning.

Corrine D. Bracey
Supervisor, LTD Claims Department
Reliance Standard Life Insurance Co.
2001 Market Street
Suite 1500
Philadelphia, PA 19103-7090
Ph# 800-351-7500, ext. 3878
Fax# 267-256-4262
corrine.bracey@rsli.com

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Redacted

>>> Timothy Scott 2/3/2016 4:17 PM >>>
Hello Corrine,

Can you please review the denial letter drafted for Melissa McIntyre 2011-09-27-0051-LTD-01 and advise of any changes that should be made?

Thanks.

From: Bracey, Corrine <Corrine.Bracey@rsli.com>
Sent: Friday, February 5, 2016 10:21 AM
To: Scott, Timothy
Subject: Re: Redacted

Good morning Tim,

Great job on both of your letters. They were very well thought out, thorough, clear and concise.

Please mail your letters out today with the current date and inform the CE of the closure if you have not already done so.

Going forward, you do not have to send me your letters to review, unless there is an IME or physician consult involved just so I can get a feel on how you reference the reports.

You have improved on your proof reading therefore it is no longer necessary for me to review your letters at this point.

Please keep up the good work!

Corrine D. Bracey
Supervisor, LTD Claims Department
Reliance Standard Life Insurance Co.
2001 Market Street
Suite 1500
Philadelphia, PA 19103-7090
Ph# 800-351-7500, ext. 3878
Fax# 267-256-4262
corrine.bracey@rsli.com

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Redacted

Redacted

Email Contact: timothy.scott@rsli.com

>>> Timothy Scott 2/3/2016 4:17 PM >>>

Hello Corrine,

Can you please review the denial letter drafted for Melissa McIntyre 2011-09-27-0051-LTD-01 and advise of any changes that should be made?

Thanks.

From: Bracey, Corrine <Corrine.Bracey@rsli.com>
Sent: Friday, December 23, 2016 8:40 AM
To: Strickler, Susan; Scott, Timothy
Subject: RE: uphold Melissa McIntyre 2011-09-27-0051-LTD-01

Good morning Susan,

This has been completed.

Thank you!

From: Strickler, Susan
Sent: Thursday, December 22, 2016 3:56 PM
To: Scott, Timothy <Timothy.Scott@rsli.com>
Cc: Bracey, Corrine <Corrine.Bracey@rsli.com>
Subject: uphold Melissa McIntyre 2011-09-27-0051-LTD-01

Hi Tim,

I am upholding your decision to terminate benefits on the above claimant.

For further explanation, please see my rationale in the appeal comments and uphold letter.

Corrine, please make sure the LTD claim is placed in the correct closure status codes.

Thanks!

Susan Strickler, HCAFA
Senior Benefits Analyst
Po Box 8330
Philadelphia PA 19103
Pn# 800-351-7500 x 4267
Fax# 267-256-3514

From: Brown, Deborah <Deborah.Brown@rsli.com>
Sent: Wednesday, November 12, 2014 12:17 PM
To: Volk, Joan
Subject: Redacted

Hi Joan,

Can you please remove Doc ID #'s 361924517 & 361924519 from the above claim? They should be scanned into Melissa McIntyre's claim 2011-09-27-0051-LTD-01.

Thanks

Deborah L. Brown, LTD Claims Examiner
Group LTD Claims Department
Reliance Standard Life Insurance Company P. O. Box 8330 Philadelphia, PA 19101-8330
800-351-7500 Ext. 3855
FAX: 267-256-4262
Hours: 8 AM to 4 PM Eastern Standard Time

From: Brown, Deborah <Deborah.Brown@rsli.com>
Sent: Thursday, November 13, 2014 9:54 AM
To: Volk, Joan
Subject: Re: M Redacted

Thanks

Deborah L. Brown, LTD Claims Examiner
Group LTD Claims Department
Reliance Standard Life Insurance Company P. O. Box 8330 Philadelphia, PA 19101-8330
800-351-7500 Ext. 3855
FAX: 267-256-4262
Hours: 8 AM to 4 PM Eastern Standard Time

>>> Joan Volk 11/12/2014 2:13 PM >>>
Hi Deb,

The documents have been corrected in both PACS and FileNet.

Joan Volk, Supervisor
Claims Set-up Unit
2001 Market St. Ste. 1500
Philadelphia, PA 19103
267-256-3512
Joan.Volk@rsli.com
>>> Deborah Brown 11/12/2014 12:17 PM >>>
Hi Joan,

Can you please remove Doc ID #'s 361924517 & 361924519 from the above claim? They should be scanned into Melissa McIntyre's claim 2011-09-27-0051-LTD-01.

Thanks

Deborah L. Brown, LTD Claims Examiner
Group LTD Claims Department
Reliance Standard Life Insurance Company P. O. Box 8330 Philadelphia, PA 19101-8330
800-351-7500 Ext. 3855
FAX: 267-256-4262

Hours: 8 AM to 4 PM Eastern Standard Time

From: Scott, Timothy <Timothy.Scott@rsli.com>
Sent: Wednesday, December 16, 2015 12:06 PM
To: Bracey, Corrine
Subject: Melissa McIntyre 2011-09-27-0051-LTD-01 (Denial)

Hello Corrine,

I have referred this claim for AO Denial per the RNR yesterday (REA today).

Thanks.

Timothy Snipes Scott
AO/WOP Claims Examiner
Reliance Standard Life Insurance
2001 Market Street, Suite 1500
Philadelphia, PA 19017-7090
Phone: 1-800-351-7500 ext 3890

Email Contact: timothy.scott@rsli.com

From: Scott, Timothy <Timothy.Scott@rsli.com>
Sent: Friday, January 29, 2016 2:24 PM
To: Bracey, Corrine
Subject: URGENT: Melissa McIntyre 2011-09-27-0051-LTD-01

Importance: High

Hello Corrine,

I am in the process of drafting the denial letter for the above-mentioned claimant and noticed that another LTD benefits check should be issued to the closure letter has yet to be sent. We last paid the claimant on 12/18/2015. I have set up another WS (#37) to pay the claimant to 01/18/2016. Can you please approve the issuance of one (1) additional month's worth of LTD benefits to pay the claimant to current and allow for completion of the letter.

Also, can you please re-close the claim file Status 63: Not TD AO [I had to temporarily re-open the file to create the new WS]. Thank you.

Timothy Snipes Scott
AO/WOP Claims Examiner
Reliance Standard Life Insurance
2001 Market Street, Suite 1500
Philadelphia, PA 19017-7090
Phone: 1-800-351-7500 ext 3890

Email Contact: timothy.scott@rsli.com

From: Scott, Timothy <Timothy.Scott@rsli.com>
Sent: Wednesday, February 3, 2016 4:17 PM
To: Bracey, Corrine
Subject: Melissa McIntyre 2011-09-27-0051-LTD-01

Hello Corrine,

Can you please review the AO Denial letter drafted for the above mentioned claim and advise of any changes that should be made?

Thanks.

Timothy Snipes Scott
AO/WOP Claims Examiner
Reliance Standard Life Insurance
2001 Market Street, Suite 1500
Philadelphia, PA 19017-7090
Phone: 1-800-351-7500 ext 3890

Email Contact: timothy.scott@rsli.com

From: Scott, Timothy <Timothy.Scott@rsli.com>
Sent: Thursday, February 4, 2016 3:04 PM
To: Bracey, Corrine
Subject: Redacted

Redacted

>>> Timothy Scott 2/3/2016 4:17 PM >>>

Hello Corrine,

Can you please review the denial letter drafted for Melissa McIntyre 2011-09-27-0051-LTD-01 and advise of any changes that should be made?

Thanks.

From: Scott, Timothy <Timothy.Scott@rsli.com>
Sent: Thursday, February 4, 2016 3:58 PM
To: HelpDesk
Subject: Fwd: Melissa McIntyre 2011-09-27-0051-LTD-01
Attachments: Melissa McIntyre 2011-09-27-0051-LTD-01

Hello,

Yesterday, I sent the attached email to my Supervisor (Corrine D. Bracey) but after speaking with her, it appears that she did not receive the email. This situation has happened before, where every few emails appears to not be received, despite GroupWise reporting that it was sent.

Can you please look into this situation, I have other examples if needed. For instance, the below email was also recently sent but not received.

From: Timothy Scott
To: Corrine Bracey
Date: 1/29/2016 4:42 PM
Subject: Re: Jan AO Report
Attachments: AO Pull List (Dominic) as of 1-28-16.xls

Timothy Snipes Scott
AO/WOP Claims Examiner
Reliance Standard Life Insurance
2001 Market Street, Suite 1500
Philadelphia, PA 19017-7090
Phone: 1-800-351-7500 ext 3890

Email Contact: timothy.scott@rsli.com

From: Scott, Timothy <Timothy.Scott@rsli.com>
Sent: Wednesday, February 3, 2016 4:17 PM
To: Bracey, Corrine
Subject: Melissa McIntyre 2011-09-27-0051-LTD-01

Hello Corrine,

Can you please review the AO Denial letter drafted for the above mentioned claim and advise of any changes that should be made?

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2001 Market Street, Suite 1500
Philadelphia, PA 19017-7090
Phone: 1-800-351-7500 ext 3890

Email Contact: timothy.scott@rsli.com

From: Scott, Timothy <Timothy.Scott@rsli.com>
Sent: Thursday, February 4, 2016 4:09 PM
To: HelpDesk
Subject: Fwd: Melissa McIntyre 2011-09-27-0051-LTD-01
Attachments: Fwd: Melissa McIntyre 2011-09-27-0051-LTD-01

Hello HelpDesk,

I was looking at all the emails that appear to have been sent but reported to have not been received, and it appears that they were all sent after 4:00 PM. I am not sure if this is a coincidence or if there is a setting that must be changed. Thanks for looking into this and all of your help.

Timothy Snipes Scott
AO/WOP Claims Examiner
Reliance Standard Life Insurance
2001 Market Street, Suite 1500
Philadelphia, PA 19017-7090
Phone: 1-800-351-7500 ext 3890

Email Contact: timothy.scott@rsli.com

From: Scott, Timothy <Timothy.Scott@rsli.com>
Sent: Thursday, February 4, 2016 3:58 PM
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Phone: 1-800-351-7500 ext 3890

Email Contact: timothy.scott@rsli.com

From: Bracey, Corrine <Corrine.Bracey@rsli.com>
Sent: Friday, January 29, 2016 3:21 PM
To: Scott, Timothy
Subject: Re: URGENT: Melissa McIntyre 2011-09-27-0051-LTD-01

Completed.

Corrine D. Bracey
Supervisor, LTD Claims Department
Reliance Standard Life Insurance Co.
2001 Market Street
Suite 1500
Philadelphia, PA 19103-7090
Ph# 800-351-7500, ext. 3878
Fax# 267-256-4262
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>>> Timothy Scott 1/29/2016 2:24 PM >>>

Hello Corrine,
I am in the process of drafting the denial letter for the above-mentioned claimant and noticed that another LTD benefits check should be issued to the closure letter has yet to be sent. We last paid the claimant on 12/18/2015. I have set up another WS (#37) to pay the claimant to 01/18/2016. Can you please approve the issuance of one (1) additional month's worth of LTD benefits to pay the claimant to current and allow for completion of the letter.

Also, can you please re-close the claim file Status 63: Not TD AO [I had to temporarily re-open the file to create the new WS]. Thank you.

Timothy Snipes Scott
AO/WOP Claims Examiner
Reliance Standard Life Insurance
2001 Market Street, Suite 1500
Philadelphia, PA 19017-7090
Phone: 1-800-351-7500 ext 3890

Email Contact: timothy.scott@rsli.com

From: "Melissa McIntyre" <melissa11@charter.net> <melissa11@charter.net>
Sent: Thursday, March 6, 2014 12:08 PM
To: Wayda, Elijah
Subject: paycheck

Hello, just letting you know that I have no paychecks for you to view this month... so you can send out my check from Reliance Standard on time.. thank you...

Melissa McIntyre

--

This message has been scanned for viruses and dangerous content by MailScanner, and is believed to be clean.

From: "Melissa McIntyre" <melissa11@charter.net> <melissa11@charter.net>
Sent: Monday, March 10, 2014 11:22 AM
To: Wayda, Elijah
Subject: Re: paycheck

Hello, just checking to make sure you received my message below... thanks..

Melissa McIntyre

----- Original Message -----

From: Melissa McIntyre
To: Reliance Standard
Sent: Thursday, March 06, 2014 10:41 AM
Subject: paycheck

Hello, just letting you know that I have no paychecks for you to view this month... so you can send out my check from Reliance Standard on time.. thank you...

Melissa McIntyre

--

This message has been scanned for viruses and dangerous content by MailScanner, and is believed to be clean.

From: "Melissa McIntyre" <melissa11@charter.net> <melissa11@charter.net>
Sent: Monday, March 10, 2014 2:33 PM
To: Wayda, Elijah
Subject: Re: paycheck

Sounds wonderful, thank you!

Melissa McIntyre

----- Original Message -----

From: Elijah Wayda
To: Melissa McIntyre
Sent: Monday, March 10, 2014 10:56 AM
Subject: Re: paycheck

Good Morning Melissa,

Yes I did receive this message. I sent a referral for my manager to release your monthly check and it should be mailed today. I thank you for continuing to update me on your earnings and I ask that you continue to do so.

If you have any other questions or concerns, please contact me.

Have a great day!

Elijah Wayda
Reliance Standard Life Insurance Company
Long Term Disability Claims
Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500 ext 4705
fax: 267-256-3535
elijah.wayda@rsli.com
>>> "Melissa McIntyre" <melissa11@charter.net> 3/10/2014 10:50 AM >>>

Hello, just checking to make sure you received my message below... thanks..

Melissa McIntyre

----- Original Message -----

From: Melissa McIntyre
To: Reliance Standard
Sent: Thursday, March 06, 2014 10:41 AM
Subject: paycheck

Hello, just letting you know that I have no paychecks for you to view this month... so you can send out my check from Reliance Standard on time.. thank you...

Melissa McIntyre

--
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--
This message has been scanned for viruses and dangerous content by MailScanner, and is believed to be clean.

From: "Melissa McIntyre" <melissa11@charter.net> <melissa11@charter.net>
Sent: Monday, March 17, 2014 11:23 AM
To: Wayda, Elijah
Subject: exam

Hello,

I got a call from one of my providers and they said they received another letter from Reliance standard.... They said it would be easier for them to answer your questions if they could do a functional capacity exam which is about \$1200 and wanted to know if reliance standard would cover the costs of doing the exam...

Thanks, Melissa

Melissa McIntyre

--

This message has been scanned for viruses and dangerous content by MailScanner, and is believed to be clean.

From: "Melissa McIntyre" <melissa11@charter.net> <melissa11@charter.net>
Sent: Tuesday, March 18, 2014 1:36 PM
To: Wayda, Elijah
Subject: Re: exam

Hi, just checking to see if you received my message below... thank you....

Melissa McIntyre

----- Original Message -----

From: Melissa McIntyre
To: Reliance Standard
Sent: Monday, March 17, 2014 10:01 AM
Subject: exam

Hello,

I got a call from one of my providers and they said they received another letter from Reliance standard.... They said it would be easier for them to answer your questions if they could do a functional capacity exam which is about \$1200 and wanted to know if reliance standard would cover the costs of doing the exam...

Thanks, Melissa

Melissa McIntyre

--

This message has been scanned for viruses and dangerous content by MailScanner, and is believed to be clean.

From: Kevin Foley <Kevin.Foley@rsli.com>
Sent: Wednesday, March 19, 2014 9:32 AM
To: Wayda, Elijah
Subject: Re: Fwd: exam

Thanks, Elijah. I do not need anything from you at this time.

Kevin P. Foley

Kevin P. Foley, LTD Claims
Reliance Standard Life Insurance Co.
2001 Market Street
Philadelphia, PA 19103
1-800-351-7500, ext. 3708
Fax: 267-256-3535

>>> Elijah Wayda 3/17/2014 11:28 AM >>>

Hey Kevin,

I just got this email from Melissa McIntyre. I saw that there were a couple of incoming documents in there and I assume those documents and this email are in regards to the AO review. Let me know if I need to do anything for this.

>>> "Melissa McIntyre" <melissa11@charter.net> 3/17/2014 11:01 AM >>>
Hello,

I got a call from one of my providers and they said they received another letter from Reliance standard.... They said it would be easier for them to answer your questions if they could do a functional capacity exam which is about \$1200 and wanted to know if reliance standard would cover the costs of doing the exam...

Thanks, Melissa

Melissa McIntyre

--

This message has been scanned for viruses and dangerous content by MailScanner (<http://www.mailscanner.info/>), and is believed to be clean.

From: "Melissa McIntyre" <melissa11@charter.net> <melissa11@charter.net>
Sent: Sunday, April 6, 2014 11:51 AM
To: Wayda, Elijah
Subject: paycheck

Hi

No paycheck this month... and I will no longer be working with MRCI so for now there will be no more paychecks... I will notify you when and if I will be receiving any more paychecks...

THanks..Melissa

Melissa McIntyre

--

This message has been scanned for viruses and dangerous content by MailScanner, and is believed to be clean.

From: "Melissa McIntyre" <melissa11@charter.net> <melissa11@charter.net>
Sent: Thursday, May 22, 2014 8:44 PM
To: Wayda, Elijah
Subject: check

Hi

Just wanted to let you know that I have not received my check for the month of May... can you make sure that it gets sent out ASAP.

Thank you...

Melissa McIntyre

--

This message has been scanned for viruses and dangerous content by MailScanner, and is believed to be clean.

From: "Melissa McIntyre" <melissa11@charter.net> <melissa11@charter.net>
Sent: Monday, May 26, 2014 9:08 PM
To: Wayda, Elijah
Subject: Re: check

great..

----- Original Message -----

From: Elijah Wayda
To: Melissa McIntyre
Sent: Friday, May 23, 2014 7:16 AM
Subject: Re: check

Good Morning Melissa,

Let me apologize for the confusion. I have approved benefits for May and the check will be sent today. There will be no delay next month or ongoing. If you have any questions, please let me know.

Elijah Wayda
Reliance Standard Life Insurance Company
Long Term Disability Claims
Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500 ext 4705
fax: 267-256-3535
elijah.wayda@rsli.com
>>> "Melissa McIntyre" <melissa11@charter.net> 5/22/2014 7:58 PM >>>

Hi

Just wanted to let you know that I have not received my check for the month of May... can you make sure that it gets sent out ASAP.

Thank you...

Melissa McIntyre

--

This message has been scanned for viruses and dangerous content by MailScanner, and is believed to be clean.

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--

This message has been scanned for viruses and dangerous content by MailScanner, and is believed to be clean.

From: "Melissa McIntyre" <melissa11@charter.net> <melissa11@charter.net>
Sent: Saturday, May 31, 2014 11:25 AM
To: Wayda, Elijah
Subject: Re: check

Hi, I still have not gotten my check, can you look into that/???

I have to have it no later then Tuesday...

Thanks.
Melissa McIntyre

----- Original Message -----

From: Melissa McIntyre
To: Reliance Standard
Sent: Thursday, May 22, 2014 6:58 PM
Subject: check

Hi

Just wanted to let you know that I have not received my check for the month of May... can you make sure that it gets sent out ASAP.

Thank you...

Melissa McIntyre

--

This message has been scanned for viruses and dangerous content by MailScanner, and is believed to be clean.

From: "Melissa McIntyre" <melissa11@charter.net> <melissa11@charter.net>
Sent: Monday, June 2, 2014 10:07 AM
To: Wayda, Elijah
Subject: Re: check

Hi,

As I figured as soon as I sent the email I got the check.... thank you for looking into it for me..

Thank you, Melissa

Melissa McIntyre

----- Original Message -----

From: Elijah Wayda
To: Melissa McIntyre
Sent: Monday, June 02, 2014 6:34 AM
Subject: Re: check

Good Morning Melissa,

I see in the system that the check was released and sent on Friday May 23. It usually takes 7-10 days for a check to arrive. Please contact me today if you receive the check. If you do not receive it, I may be able to void the check that was sent and reissue a new check and overnight mail it to you.

I'll be in the office today until about 4:30pm Eastern Standard Time.

Thanks Melissa, have a nice day,

Elijah Wayda
Reliance Standard Life Insurance Company
Long Term Disability Claims
Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500 ext 4705
fax: 267-256-3535

elijah.wayda@rsli.com

>>> "Melissa McIntyre" <melissa11@charter.net> 5/31/2014 11:24 AM >>>

Hi, I still have not gotten my check, can you look into that/???

I have to have it no later then Tuesday...

Thanks.

Melissa McIntyre

----- Original Message -----

From: Melissa McIntyre

To: Reliance Standard

Sent: Thursday, May 22, 2014 6:58 PM

Subject: check

Hi

Just wanted to let you know that I have not received my check for the month of May... can you make sure that it gets sent out ASAP.

Thank you...

Melissa McIntyre

--

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--

This message has been scanned for viruses and dangerous content by MailScanner, and is believed to be clean.

From: "Melissa McIntyre" <melissa11@charter.net> <melissa11@charter.net>
Sent: Sunday, September 21, 2014 4:38 PM
To: Wayda, Elijah
Subject: check

Helo, I thought I would just check in with you because I normally have received my disability check by now and I have not received it yet... again just checking.

Thank you...

Melissa McIntyre

--

This message has been scanned for viruses and dangerous content by MailScanner, and is believed to be clean.

From: "Melissa McIntyre" <melissa11@charter.net> <melissa11@charter.net>
Sent: Monday, September 22, 2014 10:36 AM
To: Wayda, Elijah
Subject: Re: check

thank you i'll let you know when it arrives..

Melissa

Melissa McIntyre

----- Original Message -----

From: Elijah Wayda
To: Melissa McIntyre
Sent: Monday, September 22, 2014 7:10 AM
Subject: Re: check

Good morning Melissa,

Your check was released last week and should arrive some time this week. I will continue to follow up with you until the check arrives.

Elijah Wayda
Reliance Standard Life Insurance Company
Long Term Disability Claims
Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500 ext 4705
fax: 267-256-3535
elijah.wayda@rsli.com
>>> "Melissa McIntyre" <melissa11@charter.net> 9/21/2014 4:37 PM >>>

Helo, I thought I would just check in with you because I normally have received my disability check by now and I have not received it yet... again just checking.

Thank you...

Melissa McIntyre

--

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--

This message has been scanned for viruses and dangerous content by MailScanner, and is believed to be clean.

From: "Melissa McIntyre" <melissa11@charter.net> <melissa11@charter.net>
Sent: Friday, September 26, 2014 2:49 PM
To: Wayda, Elijah
Subject: Re: check

Hi, I just wanted to let you know that I still have NOT received my check.. thought for sure it would have been here by today...

thanks,

Melissa McIntyre

----- Original Message -----

From: Elijah Wayda
To: Melissa McIntyre
Sent: Monday, September 22, 2014 7:10 AM
Subject: Re: check

Good morning Melissa,

Your check was released last week and should arrive some time this week. I will continue to follow up with you until the check arrives.

Elijah Wayda
Reliance Standard Life Insurance Company
Long Term Disability Claims
Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500 ext 4705
fax: 267-256-3535
elijah.wayda@rsli.com
>>> "Melissa McIntyre" <melissa11@charter.net> 9/21/2014 4:37 PM >>>

Helo, I thought I would just check in with you because I normally have received my disability check by now and I have not received it yet... again just checking.

Thank you...

Melissa McIntyre

--

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--

This message has been scanned for viruses and dangerous content by MailScanner, and is believed to be clean.

From: Wayda, Elijah <Elijah.Wayda@rsli.com>
Sent: Monday, March 10, 2014 11:56 AM
To: Melissa McIntyre
Subject: Re: paycheck

Good Morning Melissa,

Yes I did receive this message. I sent a referral for my manager to release your monthly check and it should be mailed today. I thank you for continuing to update me on your earnings and I ask that you continue to do so.

If you have any other questions or concerns, please contact me.

Have a great day!

Elijah Wayda
Reliance Standard Life Insurance Company Long Term Disability Claims Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500
(tel:18003517500) ext 4705
fax: 267-256-3535
(tel:2672563535)
elijah.wayda@rsli.com
>>> "Melissa McIntyre" <melissal1@charter.net> 3/10/2014 10:50 AM >>>
Hello, just checking to make sure you received my message below... thanks..

Melissa McIntyre

----- Original Message -----

From: Melissa McIntyre
(mailto:melissal1@charter.net)
To: Reliance Standard
(mailto:elijah.wayda@rsli.com)
Sent: Thursday, March 06, 2014 10:41 AM
Subject: paycheck

Hello, just letting you know that I have no paychecks for you to view this month... so you can send out my check from Reliance Standard on time.. thank you...

Melissa McIntyre

--
This message has been scanned for viruses and dangerous content by MailScanner (
<http://www.mailscanner.info/>) , and is believed to be clean.

From: Wayda, Elijah <Elijah.Wayda@rsli.com>
Sent: Monday, March 10, 2014 2:34 PM
To: Melissa McIntyre
Subject: Re: paycheck

You're welcome,

I just confirmed, the check was scheduled to go out on Saturday the 8th but checks are only mailed Monday thru Friday so the check went out today.

>>> "Melissa McIntyre" <melissal1@charter.net> 3/10/2014 1:38 PM >>>
Sounds wonderful, thank you!

Melissa McIntyre

----- Original Message -----

From: Elijah Wayda
(mailto:Elijah.Wayda@rsli.com)
To: Melissa McIntyre
(mailto:melissal1@charter.net)
Sent: Monday, March 10, 2014 10:56 AM
Subject: Re: paycheck

Good Morning Melissa,

Yes I did receive this message. I sent a referral for my manager to release your monthly check and it should be mailed today. I thank you for continuing to update me on your earnings and I ask that you continue to do so.

If you have any other questions or concerns, please contact me.

Have a great day!

Elijah Wayda
Reliance Standard Life Insurance Company Long Term Disability Claims Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500
(tel:18003517500) ext 4705
fax: 267-256-3535
(tel:2672563535)
elijah.wayda@rsli.com

>>> "Melissa McIntyre" <melissal1@charter.net> 3/10/2014 10:50 AM >>>
Hello, just checking to make sure you received my message below... thanks..

Melissa McIntyre

----- Original Message -----

From: Melissa McIntyre
(mailto:melissal1@charter.net)
To: Reliance Standard
(mailto:elijah.wayda@rsli.com)
Sent: Thursday, March 06, 2014 10:41 AM
Subject: paycheck

Hello, just letting you know that I have no paychecks for you to view this month... so you can send out my check from Reliance Standard on time.. thank you...

Melissa McIntyre

--

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--

This message has been scanned for viruses and dangerous content by MailScanner (<http://www.mailscanner.info/>), and is believed to be clean.

From: Wayda, Elijah <Elijah.Wayda@rsli.com>
Sent: Monday, March 17, 2014 11:28 AM
To: Kevin Foley
Subject: Fwd: exam

Hey Kevin,

I just got this email from Melissa McIntyre. I saw that there were a couple of incoming documents in there and I assume those documents and this email are in regards to the AO review. Let me know if I need to do anything for this.

>>> "Melissa McIntyre" <melissa11@charter.net> 3/17/2014 11:01 AM >>>

Hello,

I got a call from one of my providers and they said they received another letter from Reliance standard.... They said it would be easier for them to answer your questions if they could do a functional capacity exam which is about \$1200 and wanted to know if reliance standard would cover the costs of doing the exam...

Thanks, Melissa

Melissa McIntyre

--

This message has been scanned for viruses and dangerous content by MailScanner (<http://www.mailscanner.info/>), and is believed to be clean.

From: Wayda, Elijah <Elijah.Wayda@rsli.com>
Sent: Wednesday, March 19, 2014 9:51 AM
To: Melissa McIntyre
Subject: Re: exam

Hello Melissa,

Yes I received your message about the exam. I have passed it along to see what the next course of action would be. I will be in touch and keep you updated or you will be notified by Kevin Foley, another examiner, when a decision is made. If you have any other questions please contact me.

Thanks and have a nice day!

Elijah Wayda
Reliance Standard Life Insurance Company Long Term Disability Claims Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500
(tel:18003517500) ext 4705
fax: 267-256-3535
(tel:2672563535)
elijah.wayda@rsli.com
>>> "Melissa McIntyre" <melissal1@charter.net> 3/18/2014 1:34 PM >>>
Hi, just checking to see if you received my message below... thank you....

Melissa McIntyre

----- Original Message -----

From: Melissa McIntyre
(mailto:melissal1@charter.net)
To: Reliance Standard
(mailto:elijah.wayda@rsli.com)
Sent: Monday, March 17, 2014 10:01 AM
Subject: exam

Hello,

I got a call from one of my providers and they said they received another letter from Reliance standard.... They said it would be easier for them to answer your questions if they could do a functional capacity exam which is about \$1200 and wanted to know if reliance standard would cover the costs of doing the exam...

Thanks, Melissa

Melissa McIntyre

--
This message has been scanned for viruses and dangerous content by MailScanner (<http://www.mailscanner.info/>) , and is believed to be clean.

From: Wayda, Elijah <Elijah.Wayda@rsli.com>
Sent: Friday, May 23, 2014 8:17 AM
To: Melissa McIntyre
Subject: Re: check

Good Morning Melissa,

Let me apologize for the confusion. I have approved benefits for May and the check will be sent today. There will be no delay next month or ongoing. If you have any questions, please let me know.

Elijah Wayda
Reliance Standard Life Insurance Company Long Term Disability Claims Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500
(tel:18003517500) ext 4705
fax: 267-256-3535
(tel:2672563535)
elijah.wayda@rsli.com
>>> "Melissa McIntyre" <melissa11@charter.net> 5/22/2014 7:58 PM >>>
Hi

Just wanted to let you know that I have not received my check for the month of May... can you make sure that it gets sent out ASAP.

Thank you...

Melissa McIntyre

--

This message has been scanned for viruses and dangerous content by MailScanner (<http://www.mailscanner.info/>) , and is believed to be clean.

From: Wayda, Elijah <Elijah.Wayda@rsli.com>
Sent: Monday, June 2, 2014 7:35 AM
To: Melissa McIntyre
Subject: Re: check

Good Morning Melissa,

I see in the system that the check was released and sent on Friday May 23. It usually takes 7-10 days for a check to arrive. Please contact me today if you receive the check. If you do not receive it, I may be able to void the check that was sent and reissue a new check and overnight mail it to you.

I'll be in the office today until about 4:30pm Eastern Standard Time.

Thanks Melissa, have a nice day,

Elijah Wayda
Reliance Standard Life Insurance Company Long Term Disability Claims Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500
(tel:18003517500) ext 4705
fax: 267-256-3535
(tel:2672563535)
elijah.wayda@rsli.com
>>> "Melissa McIntyre" <melissa11@charter.net> 5/31/2014 11:24 AM >>>

Hi, I still have not gotten my check, can you look into that/???

I have to have it no later then Tuesday...

Thanks.
Melissa McIntyre
----- Original Message -----

From: Melissa McIntyre
(mailto:melissa11@charter.net)
To: Reliance Standard
(mailto:elijah.wayda@rsli.com)
Sent: Thursday, May 22, 2014 6:58 PM
Subject: check

Hi

Just wanted to let you know that I have not received my check for the month of May... can you make sure that it gets sent out ASAP.

Thank you...

Melissa McIntyre

--
This message has been scanned for viruses and dangerous content by MailScanner (<http://www.mailscanner.info/>) , and is believed to be clean.

From: Wayda, Elijah <Elijah.Wayda@rsli.com>
Sent: Monday, June 2, 2014 10:12 AM
To: Melissa McIntyre
Subject: Re: check

Ok Melissa,

No problem at all. I have made sure that the check for June will be issued on time.

Thanks for letting me know, have a nice day,

Elijah Wayda
Reliance Standard Life Insurance Company Long Term Disability Claims Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500
(tel:18003517500) ext 4705
fax: 267-256-3535
(tel:2672563535)
elijah.wayda@rsli.com
>>> "Melissa McIntyre" <melissal1@charter.net> 6/2/2014 10:06 AM >>>
Hi,

As I figured as soon as I sent the email I got the check.... thank you for looking into it for me..

Thank you, Melissa

Melissa McIntyre

----- Original Message -----

From: Elijah Wayda
(mailto:Elijah.Wayda@rsli.com)
To: Melissa McIntyre
(mailto:melissal1@charter.net)
Sent: Monday, June 02, 2014 6:34 AM
Subject: Re: check

Good Morning Melissa,

I see in the system that the check was released and sent on Friday May 23. It usually takes 7-10 days for a check to arrive. Please contact me today if you receive the check. If you do not receive it, I may be able to void the check that was sent and reissue a new check and overnight mail it to you.

I'll be in the office today until about 4:30pm Eastern Standard Time.

Thanks Melissa, have a nice day,

Elijah Wayda
Reliance Standard Life Insurance Company
Long Term Disability Claims
Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500
(tel:18003517500) ext 4705
fax: 267-256-3535
(tel:2672563535)
elijah.wayda@rsli.com
>>> "Melissa McIntyre" <melissal1@charter.net> 5/31/2014 11:24 AM >>>

Hi, I still have not gotten my check, can you look into that/???

I have to have it no later then Tuesday...

Thanks.
Melissa McIntyre
----- Original Message -----

From: Melissa McIntyre
(mailto:melissal1@charter.net)
To: Reliance Standard
(mailto:elijah.wayda@rsli.com)
Sent: Thursday, May 22, 2014 6:58 PM
Subject: check

Hi

Just wanted to let you know that I have not received my check for the month of May... can you make sure that it gets sent out ASAP.

Thank you...

Melissa McIntyre

--

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From: Wayda, Elijah <Elijah.Wayda@rsli.com>
Sent: Monday, September 22, 2014 8:10 AM
To: Melissa McIntyre
Subject: Re: check

Good morning Melissa,

Your check was released last week and should arrive some time this week. I will continue to follow up with you until the check arrives.

Elijah Wayda
Reliance Standard Life Insurance Company Long Term Disability Claims Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500
(tel:18003517500) ext 4705
fax: 267-256-3535
(tel:2672563535)
elijah.wayda@rsli.com

>>> "Melissa McIntyre" <melissa11@charter.net> 9/21/2014 4:37 PM >>>

Helo, I thought I would just check in with you because I normally have received my disability check by now and I have not received it yet... again just checking.

Thank you...

Melissa McIntyre

--

This message has been scanned for viruses and dangerous content by MailScanner (<http://www.mailscanner.info/>), and is believed to be clean.

From: Wayda, Elijah <Elijah.Wayda@rsli.com>
Sent: Monday, September 22, 2014 11:05 AM
To: Melissa McIntyre
Subject: Re: check

Thank you Melissa.

>>> "Melissa McIntyre" <melissal1@charter.net> 9/22/2014 10:33 AM >>>
thank you i'll let you know when it arrives..

Melissa

Melissa McIntyre

----- Original Message -----

From: Elijah Wayda
(mailto:Elijah.Wayda@rsli.com)
To: Melissa McIntyre
(mailto:melissal1@charter.net)
Sent: Monday, September 22, 2014 7:10 AM
Subject: Re: check

Good morning Melissa,

Your check was released last week and should arrive some time this week. I will continue to follow up with you until the check arrives.

Elijah Wayda
Reliance Standard Life Insurance Company Long Term Disability Claims Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500
(tel:18003517500) ext 4705
fax: 267-256-3535
(tel:2672563535)
elijah.wayda@rsli.com

>>> "Melissa McIntyre" <melissal1@charter.net> 9/21/2014 4:37 PM >>>

Helo, I thought I would just check in with you because I normally have received my disability check by now and I have not received it yet... again just checking.

Thank you...

Melissa McIntyre

--

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From: Wayda, Elijah <Elijah.Wayda@rsli.com>
Sent: Monday, February 2, 2015 4:22 PM
To: Melissa McIntyre
Subject: Re: check

Good afternoon Melissa,

I will be discussing your claim with my manager tomorrow. I will update you after I meet with her tomorrow morning.

Elijah Wayda
Reliance Standard Life Insurance Company Long Term Disability Claims Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500
(tel:18003517500) ext 4705
fax: 267-256-3535
(tel:2672563535)
elijah.wayda@rsli.com
>>> "Melissa McIntyre" <melissa11@charter.net> 2/2/2015 3:34 PM >>>
Hello,

I have been trying to get a hold of you by email and phone, if you were out of the office, sorry for the multiple requests... But I really need to have them release my check soon for January. I have moved money around to pay for mortgage but i'll need the check soon. Can you put a rush on whoever is reviewing my account?

Thank you, Melissa

2011-09-27-0051-LTD-01

Melissa McIntyre

----- Original Message -----

From: Elijah Wayda

(mailto:Elijah.Wayda@rsli.com)
To: Melissa McIntyre
(mailto:melissal1@charter.net)
Sent: Wednesday, February 26, 2014 11:02 AM
Subject: Re: check

Good Morning Melissa,

I apologize for the delay, your check will be sent either today or tomorrow. Please continue to update me of your earnings as you have been doing. Contact me with any questions or concerns.

Elijah Wayda
Reliance Standard Life Insurance Company Long Term Disability Claims Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500
(tel:18003517500) ext 4705
fax: 267-256-3535
(tel:2672563535)
elijah.wayda@rsli.com
>>> "Melissa McIntyre" <melissal1@charter.net> 2/26/2014 10:53 AM >>>
Hello,

I was just curious if my check has been sent out yet as I have not yet received it..

thank you.

Melissa McIntyre

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From: Wayda, Elijah <Elijah.Wayda@rsli.com>
Sent: Tuesday, February 3, 2015 11:06 AM
To: Kevin Foley
Subject: Melissa McIntyre 2011-09-27-0051-LTD-01

Hey Kev,

This woman has emailed me and called me regarding the status of her claim. Up to 12/18/2014, I was releasing benefits month by month while the AO investigation was ongoing. Martha mentioned after that last check that she wouldn't release any additional benefits until it was done. I just opened the claim and saw that the AO review is due on 2/5/2015. Is this correct? She just told me that she had to "move money around to pay for mortgage" and she needs a check soon. She requested a rush on the review. I don't know what could be done at this point. Do you have any direction I should go in?

Let me know when you get a chance. Thank you.

Elijah Wayda
Reliance Standard Life Insurance Company Long Term Disability Claims Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500
(tel:18003517500) ext 4705
fax: 267-256-3535
(tel:2672563535)
elijah.wayda@rsli.com

From: DiFalco, Heather <Heather.DiFalco@rsli.com>
Sent: Tuesday, February 3, 2015 12:39 PM
To: Bracey, Corrine
Cc: Kevin Foley
Subject: Re: (RUSH) Melissa McIntyre 2011-09-27-0051-LTD-01

Hi,
I was planning on getting into the claim just as soon as I complete the review I am in. I will email everyone when it is done. Thank you,

Heather DiFalco, RN
Nurse Case Manager
First Reliance Standard Life Insurance Company
7 Skyline Drive
Hawthorne, NY 10532
800-559-0954 X 40272
fax: 914-784-0024
heather.difalco@rsli.com>>> Corrine Bracey 2/3/2015 12:36 PM >>> Hi Heather

We have a customer service issue on the claim above.

Please conduct a rush AO medical review on the claim above ASAP. A rush task has been set for 2/4/15.

Thank you.

Corrine D. Bracey
Supervisor, LTD Claims Department
Reliance Standard Life Insurance Co.
2001 Market Street
Suite 1500
Philadelphia, PA 19103-7090
Ph# 800-351-7500, ext. 3878
Fax# 267-256-4262
corrine.bracey@rsli.com

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>>> Kevin Foley 2/3/2015 11:17 AM >>>

Hi Corrine,

Per e-mail from CE below, I would to request for a RUSH medical review regarding above claimant.

Payments are due for the claimant and we have recently received the requested medical records. Please advise if a rush review is possible.

Currently tasked to Heather DiFalco (completed previous AO review on this claim) with a RUSH request for 2/4/15

Thank you,
Kevin

Kevin P. Foley

Kevin P. Foley, LTD Claims
Reliance Standard Life Insurance Co.
2001 Market Street
Philadelphia, PA 19103
1-800-351-7500, ext. 3708
Fax: 267-256-3535

>>> Elijah Wayda 2/3/2015 11:06 AM >>>
Hey Kev,

This woman has emailed me and called me regarding the status of her claim. Up to 12/18/2014, I was releasing benefits month by month while the AO investigation was ongoing. Martha mentioned after that last check that she wouldn't release any additional benefits until it was done. I just opened the claim and saw that the AO review is due on 2/5/2015. Is this correct? She just told me that she had to "move money around to pay for mortgage" and she needs a check soon. She requested a rush on the review. I don't know what could be done at this point. Do you have any direction I should go in?

Let me know when you get a chance. Thank you.

Elijah Wayda
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Two Commerce Square
2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500 (tel:18003517500) ext 4705
fax: 267-256-3535 (tel:2672563535)
elijah.wayda@rsli.com

From: DiFalco, Heather <Heather.DiFalco@rsli.com>
Sent: Tuesday, February 3, 2015 1:40 PM
To: Bracey, Corrine
Cc: Kevin Foley
Subject: Re: (RUSH) Melissa McIntyre 2011-09-27-0051-LTD-01

Hi,
the review is done

Heather DiFalco, RN
Nurse Case Manager
First Reliance Standard Life Insurance Company
7 Skyline Drive
Hawthorne, NY 10532
800-559-0954 X 40272
fax: 914-784-0024
heather.difalco@rsli.com>>> Corrine Bracey 2/3/2015 12:36 PM >>> Hi Heather

We have a customer service issue on the claim above.

Please conduct a rush AO medical review on the claim above ASAP. A rush task has been set for 2/4/15.

Thank you.

Corrine D. Bracey
Supervisor, LTD Claims Department
Reliance Standard Life Insurance Co.
2001 Market Street
Suite 1500
Philadelphia, PA 19103-7090
Ph# 800-351-7500, ext. 3878
Fax# 267-256-4262
corrine.bracey@rsli.com

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>>> Kevin Foley 2/3/2015 11:17 AM >>>
Hi Corrine,

Per e-mail from CE below, I would to request for a RUSH medical review regarding above claimant.

Payments are due for the claimant and we have recently received the requested medical records. Please advise is a rush review is possible.

Currently tasked to Heather DiFalco (completed previous AO review on this claim) with a RUSH request for 2/4/15

Thank you,
Kevin

Kevin P. Foley

Kevin P. Foley, LTD Claims
Reliance Standard Life Insurance Co.
2001 Market Street
Philadelphia, PA 19103
1-800-351-7500, ext. 3708
Fax: 267-256-3535

>>> Elijah Wayda 2/3/2015 11:06 AM >>>
Hey Kev,

This woman has emailed me and called me regarding the status of her claim. Up to 12/18/2014, I was releasing benefits month by month while the AO investigation was ongoing. Martha mentioned after that last check that she wouldn't release any additional benefits until it was done. I just opened the claim and saw that the AO review is due on 2/5/2015. Is this correct? She just told me that she had to "move money around to pay for mortgage" and she needs a check soon. She requested a rush on the review. I don't know what could be done at this point. Do you have any direction I should go in?

Let me know when you get a chance. Thank you.

Elijah Wayda
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2001 Market Street
Suite 1500
Philadelphia, PA 19103
office: 1-800-351-7500 (tel:18003517500) ext 4705
fax: 267-256-3535 (tel:2672563535)
elijah.wayda@rsli.com

From: Tina Wells <twells@mi-pi.com> <twells@mi-pi.com>
Sent: Thursday, May 7, 2015 3:15 PM
To: Veasey, Michael
Subject: Melissa McIntyre
Attachments: McIntyre, Melissa Update.pdf; McIntyre, MelissaINV.pdf

Good Afternoon Mr. Veasey,

Attached is the report and invoice regarding Melissa McIntyre. It was previously sent to Kevin Foley.

Thank you, and have a great day.

Tina Wells

--

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416 W Talcott Rd., Suite A, Park Ridge, IL 60068
Ph: (855) 350-6474 F: (847) 993-2039
www.mi-pi.com

CONFIDENTIAL REPORT

Mr. Kevin Foley
Reliance Standard Life Insurance Co.
2001 Market Street
Philadelphia, PA 19103

Subject: Melissa McIntyre
Address: 929 Charles Avenue
Mankato, MN 56001

Employer: Vom Wenner Haus
Breeder/Owner

Report Date: 3/9/15
Claim #: 2011-09-27-0051-LTD-01
DOB: Redacted
SSN:
MIG #: 3749-2

PRIVILEGED & CONFIDENTIAL REPORT

This report is prepared in anticipation of litigation and is for your use only. It should not be displayed to any unauthorized person and is intended only to assist in evaluating the matter under consideration.

SUMMARY

Melissa McIntyre is alleging injuries that prevent her from returning to full time employment. We were requested by the reader to perform a secondary activities and background investigation.

Activities/Background

Throughout the course of our secondary investigation we were able to reconfirm that Melissa McIntyre still resides at 929 Charles Avenue, Mankato, MN 56001. The subject is known to still breed German Shepherds and had just recently bred one of her dogs that had given birth on February 17th, 2015. Her breeding is still done under the name of Vom Wenner Haus and she is still associated with Key City Kennel Club. The subject is also still recognized as a breeder with the German Shepherd Dog Club. Ms. McIntyre also has updated her registered nurse's license

RSL001372

McIntyre 2011-09-27-0051-LTD-01

which now doesn't expire until 5/31/2016.

Updates to the subject's Facebook profile and to the Facebook profile of Vom Wenner Haus show many photos of the subject's progress with her breeding and competitions. The subject is also associated with a business through the Minnesota Secretary of State entitled Better Days Ahead. The business is in good standing and lists the subject as the nameholder of the company.

In terms of public records we were unable to uncover and new cases for Melissa McIntyre while searching the entire state of Minnesota. Further details of our investigation can be found in the body of the report.

PROCEDURE

We began our secondary investigation into Melissa McIntyre by conducting a database search in order to develop and reconfirm demographic information. The subject's date of birth is Redacted and social security number is Redacted. We were able to confirm this information to still be correct and current. With this information we turned our attention to the subject's last known hometown of Mankato, MN.

Turning our attention to the Blue Earth County Tax Assessor's Office, we attempted to see if the subject has gained or lost any ownership since our previous investigation. Confirming that the subject resides at 929 Charles Avenue, we determined that the property is still owned by Melissa McIntyre, having a total market value of \$115,400. The subject is not associated with any other properties within the state of Minnesota.

Returning to the subject's neighborhood we began to develop additional contacts familiar with the subject. A female source reestablished that the subject was residing at the known address and was still heavily involved with her dogs and breeding business. When at the residence it was stated that the subject not only cares for her dogs but also dog-sits for friends when they go out of town. She has been seen departing the area to spend time with family and friends and still appears able to drive a motor vehicle. Most of her time is invested in her dogs and their competitions, which has her constantly training throughout the year.

A male source established that the subject is still working part time as a registered nurse and also continues her breeding business entitled Vom Wenner Haus. Our source was aware that the subject had traveled to Chicago, IL to have her last breeding session completed. Her dog had given birth to a litter in February of

McIntyre 2011-09-27-0051-LTD-01

2015. Although the subject still identifies herself as dealing with a disability, when observed she doesn't appear to use any orthopedic devices for assistance.

The subject is associated with one entity through the Minnesota Secretary of State entitled Better Days Ahead. The business is still an active entity and lists the subject as the nameholder of the company. We then checked with the Hoover's Business website to see if the business reports any annual sales. No records were listed. The Minnesota Secretary of State Registration can be seen below:

Minnesota Business Name Better Days Ahead	
Business Type Assumed Name	MN Statute 333
File Number 452468700025	Filing Date 11/17/2011
Status Active / In Good Standing	Renewal Due Date 12/31/2012
Registered Agent(s) (Optional) None provided	Principal Place of Business Address 929 Charles Ave Mankato, MN 56001 USA
Nameholder Melissa McIntyre	Nameholder Address 929 Charles Ave, Mankato, MN 56001

Checking with the Minnesota Department of Motor Vehicles we attempted to verify any vehicle ownership that the subject has gained or lost since our previous investigation. The subject was found to still be the registered owner of a 2004 Honda Odyssey EXL.

The Minnesota Board of Nursing identified that the subejct had renewed her registered nurse's license which now doesn't expire until 5/31/2016. The license can be seen below:

Personal Information		
Name (Full):	MELISSA ANN MCINTYRE	
Date of Birth:	05-03-1970	
Gender:	Female	
License Information		
License Number	Original Date of Licensure	Expiration Date
R 160326-1	05-30-2003	05-31-2016
Action History		
None		

McIntyre 2011-09-27-0051-LTD-01

Facebook profiles were recovered for the subject and her her breeding business. Posts and photos can be seen of the recent breeding that she has done as well as competitions that her dogs have won. She also documents training her dogs and posts videos of them in her backyard. One specific post notes that the subject had attempted to snowblow but after it wasn't working she would shovel instead. Additional posts note the subject's interest in gardening and taking care of her pet fish. On January 3rd, 2015 the subject identifies that she had attended the Science Museum in Minnesota with her friends. The profiles can be seen below:

<https://www.facebook.com/melissa.mcintyre.562?fref=ts>



Melissa McIntyre

Yesterday at 11:15am · 🌐

Okay, wondering if anyone can help me find reasoning with this.. maybe I'm missing something..

So my family is coming over and we are going to order some pizzas from dominos.. so I was trying to find the cheapest way with coupons and such.. this is what I found out..

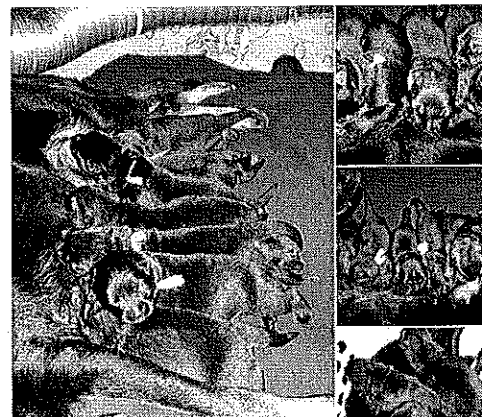
If you did the group ordering (4+ pizzas) they raised the prices of the pizzas regular price and then gave the 10% discount.. with this option it was more expensive then ordering without the 10% off..

Then I tried adding a coupon instead... again they reduced the price of the pizza which the coupon went with but then increased the price of one of the other pizza and again more expensive then just buying regular..

But with a different coupon it was a couple bucks cheaper...

UHM.....

Like · Share

Melissa McIntyre shared vom Wenner Haus German Shepherd's album
March 1 at 4:32pm · 🌐

McIntyre 2011-09-27-0051-LTD-01

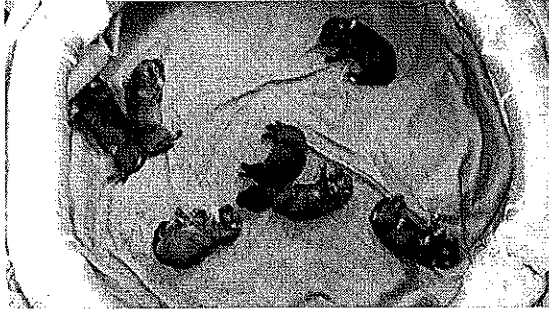
**Melissa McIntyre**

February 28 at 8:51pm · Edited · 49

All the puppies are doing great getting stronger everyday

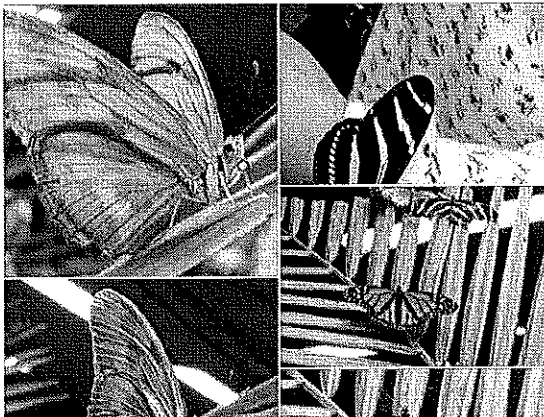
For those of you not seeing all the photos and information on my vom Wenner Haus Facebook page, make sure you click on the "following" along with the "like" button.... I've heard from a few of you that you have not been seeing any of my photos and figured that might be why... Hope that helps! ☺

I'm trying to put up new photos every few days as they are growing like weeds and starting to develop some personality

**Melissa McIntyre** added 23 new photos

January 3 · 49

I had an awesome time with one of my best friends Tonia and her family at the Science Museum here in Minnesota to see the butterfly exhibit! It was really neat to see all the butterflies flying around and landing on you.... they were very beautiful and the movie was good too ☺ — with Tonia Nelsen Heller and Denise Nelsen at Science Museum of Minnesota.

**Melissa McIntyre**

December 10, 2014 · 49

Kinda bummed... I was going to go see the Shedd Aquarium on Sunday in Chicago since I'll be down that way having Linea bred. but parking is \$49 in advance because there is a Bears game otherwise it's \$22.... wow.... guess I'll go see a movie in Rockford instead....

Like · Share

**Melissa McIntyre** added 6 new photos

January 5 · 49

Here's a few photos of the same fish that might show the lip fibroma a little bit easier the other one is being bashful right now. The interesting thing is I bought these two of my seven angelfish at the same time so they probably are out of the same batch so I kind of wonder if there's not a genetic component to it



McIntyre 2011-09-27-0051-LTD-01

Melissa McIntyre
November 20, 2014 · 14

I am dog sitting my friend's dog, Winston, he's obviously the big guy in the middle. It was really hard getting them to hold still long enough to take a picture, they were having so much fun playing in all of our new snow. — with Karen Anderson Byron.

Melissa McIntyre shared Vom Wenner Haus German
Shepherds's photo
November 6, 2014 · 5

Breeding Announcement!!!! I am only taking a couple more reservations at this time until the puppies arrive...

VOM WENNER HAUS
We are very excited to announce our upcoming breeding puppies expected February 2015!

<p>V. Roy von Zorra SchIR KNI at normal, elbows normal, DM clear</p>	<p>UROTAGI von CHUGRCH Illana von Hollaren BH BN BN OV TDI CGCA OFA Fair (waiting on 2 samples, elbows normal, DM clear, CERF normal)</p>
---	--

Expecting high quality, strong working dogs with wonderful temperaments. Suitable for Search and Rescue, K9, sport/competition, and active homes. Only taking a couple more reservations until puppies arrive!

Melissa McIntyre
November 16, 2014 · 14

UGH so yesterday not feeling the best but feeling a little better today, so this morning I started by playing a little bit with the dogs in the backyard before going to snowblow the front yard.. when I went to go snowblow the driveway the snow blower wouldn't start.. so I did only what needed to be done by hand. went into back yard to get the dogs and Ceyla had dug up part of my flower bed which had my new lily and lily tree bulbs and by doing so also broke off some of my plant stakes so that I would know where things were come spring!!!! I found one bulb and I'm hoping that was the only victim... put it back into place with frozen fingers as best I could but it needed more soil, but hey some good news I'm thinking I have some left over, well it was frozen too !! OK so I took a few well several big breathes and I brought the soil inside I'll let it thaw and then I'll put it out later and hopefully it'll be okay. I'm also going to grab my large fencing and put it around that area so she doesn't do it again... sigh....

Melissa McIntyre added 6 new photos
October 10, 2014 · 14

My new **Marimo Moss Ball** finally arrived the other day... I got 10 of them they are huge... they're between two and three inches long and since the company over in Singapore was way over a week late they gave me a full refund so I basically got them all for free just had to wait a little longer to get them. My angel fish are doing well and getting very big, nice long fins, looking great...



<https://www.facebook.com/pages/Vom-Wenner-Haus-German-Shepherds/1131783353>

Vom Wenner Haus German Shepherds

Vom Wenner Haus German Shepherds Community

Timeline About Photos Videos Likes

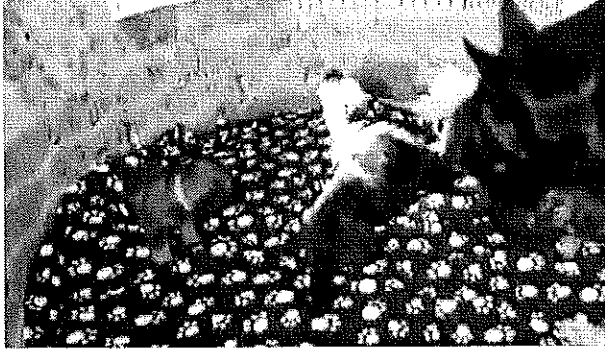
McIntyre 2011-09-27-0051-LTD-01



Vom Wenner Haus German Shepherds

March 7 at 1:26pm · 45

Puppies are two and a half weeks old down.. they're getting stronger and almost walking..... they're starting to play and doing just doing great



Vom Wenner Haus German Shepherds

February 18 at 6:47am · 45

Start of day 3 & mama and babies are all doing great ! everybody is gaining weight , some faster then others, very active and very very loud when they want to be...

I'll have individual pictures later in the day.... still need to get caught up on some sleep (3)

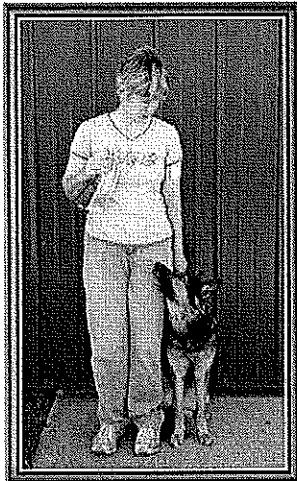


Vom Wenner Haus German Shepherds with Vom Gildaf

German Shepherds and Melinda Clark

July 1, 2014 · 45

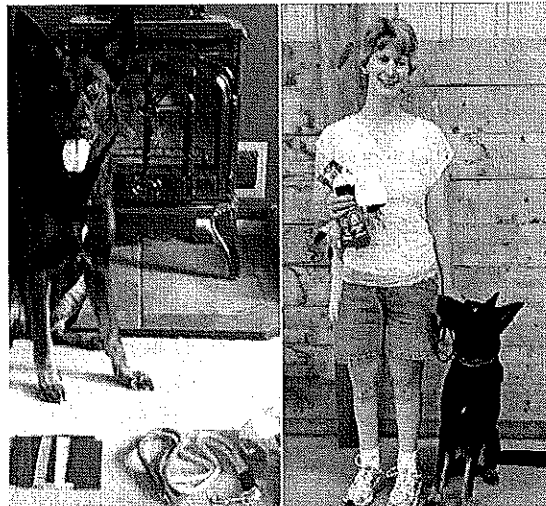
Ceyla finished her UKC Rally Championship I (UROC) this is her 28th title



Vom Wenner Haus German Shepherds added 2 new photos

June 23, 2014 · 45

Linea earned her 2nd legs in both Novice B and Rally Advanced on Sunday at the local GSD specialty... with a 2nd and 4th placings...



McIntyre 2011-09-27-0051-LTD-01



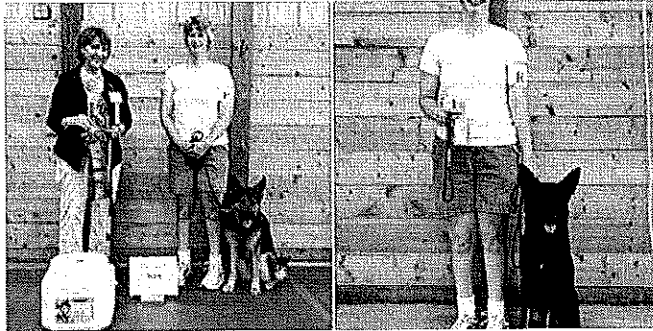
Vom Wenner Haus German Shepherds with Anna Asmussen and Jennifer Holtgrew
June 21, 2014 Edited: 25

Today at the GSD local Specialty Ceyla took High Combine in Rally and Linea earned her first legs towards her Novice obedience title (2nd place) and Rally Advanced title (3rd place)...



Vom Wenner Haus German Shepherds added 2 new photos — with Melinda Clark and 2 others.
June 21, 2014 Edited: 25

Today at the GSD local Specialty Ceyla took High Combine in Rally and Linea earned her first legs towards her Novice obedience title (2nd place) and Rally Advanced title (3rd place)...



The subject's website for Vom Wenner Haus appears to have been updated since our previous investigation. It notes that a litter of puppies were born on February 17th, 2015 from the last breeding session. The website can be seen below:

www.vomwennerhaus.com/index.html

VOM WENNER HAUS

Home Puppies References Adoptions About Us Contact Us Links

WHAT A GERMAN SHEPHERD DOG SHOULD BE

Two's company... Puppies Family Puppies Search and Rescue

Welcome to vom Wenner Haus!

Upcoming Litters!

Puppies Born: February 17th, 2015
5 Males and 2 Females

V Boy von Zorra SchH3 KKL1
"sl" normal, elbows normal, DH carrier

URO1 UAG1 Int CH UGRCH H'Linea von Holtgrew
BH BN RN OV TDI CGCA
"a" normal, elbows normal, DH clear, CERF normal

Expecting high quality, strong working dogs with wonderful temperaments suitable for sport/competition, SAR, Service/therapy dogs, etc. and active homes.

Click here to see more **INFORMATION** on this upcoming breeding....

All Puppies are spoken for. If you would like to be put on the waiting list for next year please contact me.

McIntyre 2011-09-27-0051-LTD-01

The subject was also still found to be associated with Key City Kennel Club and is still listed as a breeder for the German Shepherd Dog Club of Minneapolis and St. Paul, Inc.

A search of criminal, civil, and traffic court records was conducted in the areas where the subject has residential history. The search was conducted throughout the entire state of Minnesota. No new cases were uncovered.

We then checked with the U.S. Bankruptcy court to see if the subject has filed for bankruptcy since our last investigation. No records were found.

At this time we are terminating our secondary investigation into Melissa McIntyre. If further work is needed on this case please advise. We appreciate your business and look forward to working with you in the future.

From: <twells@mi-pi.com> <twells@mi-pi.com>
Sent: Wednesday, May 27, 2015 1:44 PM
To: Veasey, Michael
Subject: RE: Re: Melissa McIntyre

Good Afternoon Mr. Veasey,

Thank you for issuing payment for the report...and you are more than welcome for me resending same.

I have notified the Surveillance Manager about the surveillance for Melissa McIntyre. You will receive an acknowledgement tomorrow.

Thank you, and have a great day.

Tina Wells

--- Originally sent by michael.veasey@rsli.com on May 27, 2015 11:57 AM ---

This message was sent securely using ZixCorp.

Hi Tina,

I just issued payment for this report/invoice, thanks again for resending it.

Could you please set up surveillance on this claimant as well? I would like three days of surveillance completed. Please schedule for a Thursday, Saturday, and Monday, preferably during decent weather.

Thank you,

Michael Veasey

Reliance Standard Life Insurance

2001 Market St., Suite 1500

Philadelphia, PA 19103

Michael.Veasey@RSLI.com

Toll Free: 800-351-7500 ext. 3890

Direct Line: (267) 256-3890

Fax: (267) 256-4262

>>> Tina Wells <twells@mi-pi.com> 5/7/2015 3:14 PM >>>

Good Afternoon Mr. Veasey,

Attached is the report and invoice regarding Melissa McIntyre. It was previously sent to Kevin Foley.

Thank you, and have a great day.

Tina Wells

--

This message has been scanned for viruses and
dangerous content by MailScanner , and is
believed to be clean.

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From: Marilyn Morad <MMorad@mi-pi.com> <MMorad@mi-pi.com>
Sent: Monday, June 1, 2015 9:41 AM
To: Veasey, Michael
Subject: RE: RE: Re: Melissa McIntyre

Mr. Veasey,
The assignment below was received. Thanks you.
Marilyn

From: Michael.Veasey@rsli.com [mailto:Michael.Veasey@rsli.com]
Sent: Friday, May 29, 2015 11:56 AM
To: Marilyn Morad
Subject: Fwd: RE: Re: Melissa McIntyre

Hi Marilyn,

Could you please confirm the request below for additional surveillance was received?

Thank you,

Michael Veasey
Reliance Standard Life Insurance
2001 Market St., Suite 1500
Philadelphia, PA 19103
Michael.Veasey@RSLI.com<mailto:Michael.Veasey@RSLI.com>
Toll Free: 800-351-7500<tel:8003517500> ext. 3890 Direct Line: (267) 256-3890
Fax: (267) 256-4262<tel:2672564262>
>>> <twells@mi-pi.com<mailto:twells@mi-pi.com>> 5/27/2015 1:43 PM >>>
This message was sent securely using ZixCorp.<<http://www.zixcorp.com/get-started/>>

Good Afternoon Mr. Veasey,

Thank you for issuing payment for the report...and you are more than welcome for me resending same.

I have notified the Surveillance Manager about the surveillance for Melissa McIntyre. You will receive an acknowledgement tomorrow.

Thank you, and have a great day.

Tina Wells

--- Originally sent by michael.veasey@rsli.com<mailto:michael.veasey@rsli.com> on May 27, 2015 11:57 AM
--- This message was sent securely using ZixCorp.<<http://www.zixcorp.com/get-started/>>

Hi Tina,

I just issued payment for this report/invoice, thanks again for resending it.

Could you please set up surveillance on this claimant as well? I would like three days of surveillance completed. Please schedule for a Thursday, Saturday, and Monday, preferably during decent weather.

Thank you,

Michael Veasey
Reliance Standard Life Insurance
2001 Market St., Suite 1500
Philadelphia, PA 19103
Michael.Veasey@RSLI.com<mailto:Michael.Veasey@RSLI.com>
Toll Free: 800-351-7500 ext. 3890
Direct Line: (267) 256-3890
Fax: (267) 256-4262
>>> Tina Wells <twells@mi-pi.com<mailto:twells@mi-pi.com>> 5/7/2015 3:14
>>> PM >>>
Good Afternoon Mr. Veasey,

Attached is the report and invoice regarding Melissa McIntyre. It was previously sent to Kevin Foley.

Thank you, and have a great day.

Tina Wells

--

This message has been scanned for viruses and dangerous content by
MailScanner<<http://www.mailscanner.info/>> , and is believed to be clean.

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--

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From: Marilyn Morad <MMorad@mi-pi.com> <MMorad@mi-pi.com>
Sent: Monday, June 1, 2015 10:06 AM
To: Veasey, Michael
Subject: claim # 2011-09-27-0051-LTD-01- Melissa McIntyre
Attachments: image001.jpg

[cid:image001.jpg@01D00E18.DE367820]

416 W Talcott Rd., Suite A, Park Ridge, IL 60068
Ph: (855) 350-6474 F: (847) 993-2039
www.mi-pi.com<<http://www.mi-pi.com>>

6/01/2015

Mr. Michael Veasey
Reliance Standard Life Insurance
2001 Market Street #1500
Philadelphia, PA 19103

Dear Mr. Veasey,

Thank you for the assignment regarding claim # 2011-09-27-0051-LTD-01- Melissa McIntyre.

This is an acknowledgement that we are in receipt of your claim.

We appreciate your business and you will be receiving a report from an investigator.

Sincerely,
Marshall Investigative Group, Inc.

--

This message has been scanned for viruses and dangerous content by MailScanner, and is believed to be clean.

From: Tina Wells <twells@mi-pi.com> <twells@mi-pi.com>
Sent: Thursday, July 2, 2015 12:34 PM
To: Veasey, Michael
Subject: claim #2011-09-27-0051-LTD-01 – Melissa McIntyre
Attachments: McIntyre, MelissaINV.pdf; image001.jpg; McIntyre, Melissa SURV.pdf

INVESTIGATIVE G
[cid:image001.jpg@01D0B4BA.E6FAFEB0]
416 W Talcott Rd., Suite A, Park Ridge, IL 60068
Ph: (855) 350-6474 F: (847) 993-2039
www.mi-pi.com

July 2, 2015

Mr. Michael Veasey
Reliance Standard Life Insurance Company P.O. Box 8330 Philadelphia, PA 19101

Dear Mr. Veasey,

Thank you for using Marshall Investigative Group. Attached is your report and invoice regarding claim #2011-09-27-0051-LTD-01 – Melissa McIntyre.

Mr. Veasey, we greatly appreciate your business and look forward to working with you again.

Respectfully,

Tina Wells
Marshall Investigative Group

--

This message has been scanned for viruses and dangerous content by MailScanner, and is believed to be clean.

From: Bracey, Corrine <Corrine.Bracey@rsli.com>
Sent: Thursday, July 9, 2015 2:15 PM
To: Veasey, Michael
Subject: Re: Possible Peer Review?

Hi Michael,

Please contact the claimant and confirm she has treated with her physicians this year. We only have medical on file to 11/14.

If the claimant treated, please update the medicals prior to our referral to PDA. If the claimant has not treated, we will refer the claim to Dr. Parke for a physician consult review and inform her of the same.

Thank you.

Corrine D. Bracey
Supervisor, LTD Claims Department
Reliance Standard Life Insurance Co.
2001 Market Street
Suite 1500
Philadelphia, PA 19103-7090
Ph# 800-351-7500, ext. 3878
Fax# 267-256-4262
corrine.bracey@rsli.com

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>>> Michael Veasey 7/8/2015 4:00 PM >>>
Hi Corrine,

Could you have a look at the RNR, updated meds, and surveillance report for claim 2011-09-27-0051-LTD-01? I feel this might be a good candidate for Dr. Parke to take a look at, let me know what you think.

Regards,

Michael Veasey

Reliance Standard Life Insurance
2001 Market St., Suite 1500
Philadelphia, PA 19103

Michael.Veasey@RSLI.com
Toll Free: 800-351-7500
(tel:8003517500) ext. 3890
Direct Line: (267) 256-3890
Fax: (267) 256-4262
(tel:2672564262)

From: Veasey, Michael <Michael.Veasey@rsli.com>
Sent: Wednesday, April 8, 2015 10:47 AM
To: vbenjamin@mi-pi.com
Subject: Status Update

Hi Valentina,

I just wanted to follow up on an activity check that was requested by Kevin Foley a while back. Kevin is no longer with the company, so I wanted to make sure the report was sent to my email and not his since I don't think he emails are being forwarded.

The claim is for Melissa McIntyre, claim #2011-09-27-0051-LTD-01

Thanks,

Michael Veasey

Reliance Standard Life Insurance
2001 Market St., Suite 1500
Philadelphia, PA 19103
Michael.Veasey@RSLI.com
Toll Free: 800-351-7500
(tel:8003517500) ext. 3890
Direct Line: (267) 256-3890
Fax: (267) 256-4262
(tel:2672564262)

From: Veasey, Michael <Michael.Veasey@rsli.com>
Sent: Wednesday, May 27, 2015 12:57 PM
To: Tina Wells
Subject: Re: Melissa McIntyre
Attachments: McIntyre, MelissaINV.pdf; McIntyre, Melissa Update.pdf

Hi Tina,

I just issued payment for this report/invoice, thanks again for resending it.

Could you please set up surveillance on this claimant as well? I would like three days of surveillance completed. Please schedule for a Thursday, Saturday, and Monday, preferably during decent weather.

Thank you,

Michael Veasey

Reliance Standard Life Insurance
2001 Market St., Suite 1500
Philadelphia, PA 19103
Michael.Veasey@RSLI.com
Toll Free: 800-351-7500
(tel:8003517500) ext. 3890
Direct Line: (267) 256-3890
Fax: (267) 256-4262
(tel:2672564262)
>>> Tina Wells <twells@mi-pi.com> 5/7/2015 3:14 PM >>>

Good Afternoon Mr. Veasey,

Attached is the report and invoice regarding Melissa McIntyre. It was previously sent to Kevin Foley.

Thank you, and have a great day.

Tina Wells

--

This message has been scanned for viruses and dangerous content by MailScanner (<http://www.mailscanner.info/>), and is believed to be clean.



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Ph: (855) 350-6474 F: (847) 993-2039
www.mi-pi.com

CONFIDENTIAL REPORT

Mr. Kevin Foley
Reliance Standard Life Insurance Co.
2001 Market Street
Philadelphia, PA 19103

Subject: Melissa McIntyre
Address: 929 Charles Avenue
Mankato, MN 56001

Employer: Vom Wenner Haus
Breeder/Owner

Report Date: 3/9/15
Claim #: 2011-09-27-0051-LTD-01
DOB: Redacted
SSN:
MIG #: 3749-2

PRIVILEGED & CONFIDENTIAL REPORT

This report is prepared in anticipation of litigation and is for your use only. It should not be displayed to any unauthorized person and is intended only to assist in evaluating the matter under consideration.

SUMMARY

Melissa McIntyre is alleging injuries that prevent her from returning to full time employment. We were requested by the reader to perform a secondary activities and background investigation.

Activities/Background

Throughout the course of our secondary investigation we were able to reconfirm that Melissa McIntyre still resides at 929 Charles Avenue, Mankato, MN 56001. The subject is known to still breed German Shepherds and had just recently bred one of her dogs that had given birth on February 17th, 2015. Her breeding is still done under the name of Vom Wenner Haus and she is still associated with Key City Kennel Club. The subject is also still recognized as a breeder with the German Shepherd Dog Club. Ms. McIntyre also has updated her registered nurse's license

RSL001396

McIntyre 2011-09-27-0051-LTD-01

which now doesn't expire until 5/31/2016.

Updates to the subject's Facebook profile and to the Facebook profile of Vom Wenner Haus show many photos of the subject's progress with her breeding and competitions. The subject is also associated with a business through the Minnesota Secretary of State entitled Better Days Ahead. The business is in good standing and lists the subject as the nameholder of the company.

In terms of public records we were unable to uncover and new cases for Melissa McIntyre while searching the entire state of Minnesota. Further details of our investigation can be found in the body of the report.

PROCEDURE

We began our secondary investigation into Melissa McIntyre by conducting a database search in order to develop and reconfirm demographic information. The subject's date of birth is Redacted and social security number is Redacted. We were able to confirm this information to still be correct and current. With this information we turned our attention to the subject's last known hometown of Mankato, MN.

Turning our attention to the Blue Earth County Tax Assessor's Office, we attempted to see if the subject has gained or lost any ownership since our previous investigation. Confirming that the subject resides at 929 Charles Avenue, we determined that the property is still owned by Melissa McIntyre, having a total market value of \$115,400. The subject is not associated with any other properties within the state of Minnesota.

Returning to the subject's neighborhood we began to develop additional contacts familiar with the subject. A female source reestablished that the subject was residing at the known address and was still heavily involved with her dogs and breeding business. When at the residence it was stated that the subject not only cares for her dogs but also dog-sits for friends when they go out of town. She has been seen departing the area to spend time with family and friends and still appears able to drive a motor vehicle. Most of her time is invested in her dogs and their competitions, which has her constantly training throughout the year.

A male source established that the subject is still working part time as a registered nurse and also continues her breeding business entitled Vom Wenner Haus. Our source was aware that the subject had traveled to Chicago, IL to have her last breeding session completed. Her dog had given birth to a litter in February of

McIntyre 2011-09-27-0051-LTD-01

2015. Although the subject still identifies herself as dealing with a disability, when observed she doesn't appear to use any orthopedic devices for assistance.

The subject is associated with one entity through the Minnesota Secretary of State entitled Better Days Ahead. The business is still an active entity and lists the subject as the nameholder of the company. We then checked with the Hoover's Business website to see if the business reports any annual sales. No records were listed. The Minnesota Secretary of State Registration can be seen below:

Minnesota Business Name Better Days Ahead	
Business Type Assumed Name	MN Statute 333
File Number 452488700025	Filing Date 11/17/2011
Status Active / In Good Standing	Renewal Due Date 12/31/2012
Registered Agent(s) (Optional) None provided	Principal Place of Business Address 929 Charles Ave Mankato, MN 56001 USA
Nameholder Melissa McIntyre	Nameholder Address 929 Charles Ave, Mankato, MN 56001


Checking with the Minnesota Department of Motor Vehicles we attempted to verify any vehicle ownership that the subject has gained or lost since our previous investigation. The subject was found to still be the registered owner of a 2004 Honda Odyssey EXL.

The Minnesota Board of Nursing identified that the subject had renewed her registered nurse's license which now doesn't expire until 5/31/2016. The license can be seen below:

Personal Information		
Name (FNU):	MELISSA ANN MCINTYRE	
Date of Birth:	05-03-1970	
Gender:	Female	
Licensing Information		
License Number	Original Date of Licensure	Expiration Date
R 160226-4	05-30-2003	05-31-2016
Action History		
None		

McIntyre 2011-09-27-0051-LTD-01

Facebook profiles were recovered for the subject and her her breeding business. Posts and photos can be seen of the recent breeding that she has done as well as competitions that her dogs have won. She also documents training her dogs and posts videos of them in her backyard. One specific post notes that the subject had attempted to snowblow but after it wasn't working she would shovel instead. Additional posts note the subject's interest in gardening and taking care of her pet fish. On January 3rd, 2015 the subject identifies that she had attended the Science Museum in Minnesota with her friends. The profiles can be seen below:

 <https://www.facebook.com/melissa.mcintyre.562?fref=ts>



Melissa McIntyre

Yesterday at 11:15am · 🌐

Okay, wondering if anyone can help me find reasoning with this.. maybe i'm missing something..

So my family is coming over and we are going to order some pizzas from dominos.. so i was trying to find the cheapest way with coupons and such.. this is what i found out..

if you did the group ordering (4+ pizzas) they raised the prices of the pizzas regular price and then gave the 10% discount.. with this option it was more expensive then ordering without the 10% off..

Then i tried adding a coupon instead... again they reduced the price of the pizza which the coupon went with but then increased the price of one of the other pizza and again more expensive then just buying regular..

But with a different coupon it was a couple bucks cheaper...

UHM.....

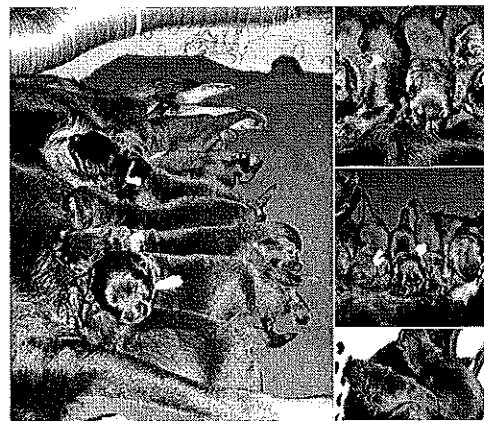
Like · Share



Melissa McIntyre shared Von Wenner Haus German

Shepherd's album

March 1st at 4:23pm · 🌐



McIntyre 2011-09-27-0051-LTD-01

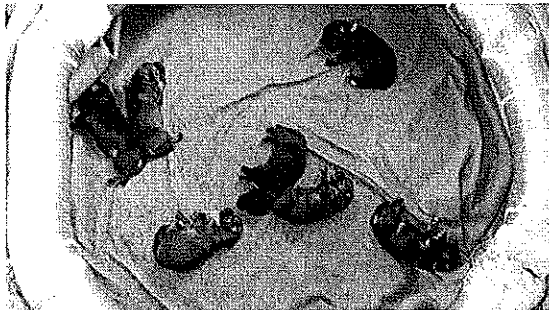
**Melissa McIntyre**

February 23 at 3:51pm · Public · 15

All the puppies are doing great getting stronger everyday

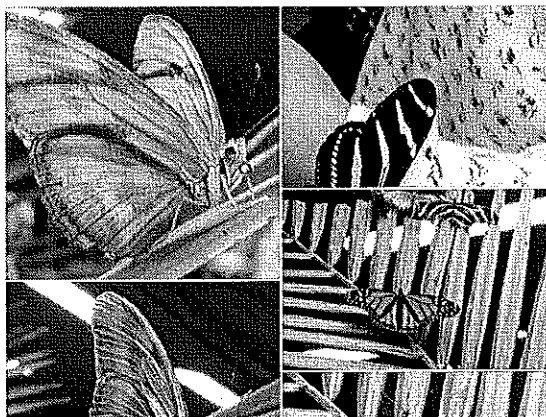
For those of you not seeing all the photos and information on my vom Wenner Haus Facebook page, make sure you click on the "following" along with the "like" button.... I've heard from a few of you that you have not been seeing any of my photos and figured that might be why... Hope that helps!!

I'm trying to put up new photos every few days as they are growing like weeds and starting to develop some personality

**Melissa McIntyre** added 23 new photos

January 3 · 15

I had an awesome time with one of my best friends Tonia and her family at the Science Museum here in Minnesota to see the butterfly exhibit! It was really neat to see all the butterflies flying around and landing on you.... they were very beautiful and the movie was good too 🐞 — with Tonia Nelsen Heller and Denise Nelsen at Science Museum of Minnesota.

**Melissa McIntyre**

December 18, 2014 · 15

Kinda bummed... I was going to go see the Shedd Aquarium on Sunday in Chicago since I'll be down that way having Linea bred. but parking is \$49 in advance because there is a Bears game otherwise it's \$22.... wow.... guess I'll go see a movie in Rockford instead....

Like · Share

**Melissa McIntyre** added 6 new photos

January 5 · 15

Here's a few photos of the same fish that might show the lip fibroma a little bit easier the other one is being bashful right now . The interesting thing is I bought these two of my seven angelfish at the same time so they probably are out of the same batch so I kind of wonder if there's not a genetic component to it



McIntyre 2011-09-27-0051-LTD-01

Melissa McIntyre
November 26, 2014 · 9

I am dog sitting my friend's dog, Winston. he's obviously the big guy in the middle. It was really hard getting them to hold still long enough to take a picture, they were having so much fun playing in all of our new snow. with Karen Anderson Byron.

Melissa McIntyre shared Vom Wenner Haus German Shepherd's photo
November 9, 2014 · 9

Breeding Announcement!!!! I am only taking a couple more reservations at this time until the puppies arrive...

VOM WENNER HAUS
We are very excited to announce our upcoming breeding!
Puppies expected February 2015

<p>V Roy von Zaria Schltz KRLI at normal elbows normal, DM clear</p>	<p>UROI UAGI the CH DGRCH HLha von Holgeren-BH BN RN OV TDLGCA OFA Pdx (rating on 14 stings), elbows normal, DM clear, CERF normal</p>
---	---

Expecting high quality, strong working dogs with wonderful temperaments.
Suitable for Search and Rescue, K9, sport/competition, and active homes.
Only taking a couple more reservations until puppies arrive!

Melissa McIntyre
November 16, 2014 · 9

UGH so yesterday not feeling the best but feeling a little better today. so this morning I started by playing a little bit with the dogs in the backyard before going to snowblow the front yard.. when I went to go snowblow the driveway the snow blower wouldn't start.. so I did only what needed to be done by hand. went into back yard to get the dogs and Ceyla had dug up part of my flower bed which had my new lily and lily tree bulbs and by doing so also broke off some of my plant stakes so that I would know where things were come spring!!!! I found one bulb and I'm hoping that was the only victim... put it back into place with frozen fingers as best I could but it needed more soil. but hey some good news I'm thinking I have some left over, well it was frozen too !! OK so I took a few well several big breathes and I brought the soil inside I'll let it thaw and then I'll put it out later and hopefully it'll be okay. I'm also going to grab my large fencing and put it around that area so she doesn't do it again... sigh....

Melissa McIntyre added 8 new photos
October 19, 2014 · 9

My new Ltarino Moss ball finally arrived the other day... I got 10 of them they are huge... they're between two and three inches long and since the company over in Singapore was way over a week late they gave me a full refund so I basically got them all for free just had to wait a little longer to get them. My angel fish are doing well and getting very big. nice long fins, looking great...



<https://www.facebook.com/pages/Vom-Wenner-Haus-German-Shepherds/1131783353>

Vom Wenner Haus German Shepherds

Vom Wenner Haus German Shepherds Community

Timeline About Photos Videos Likes

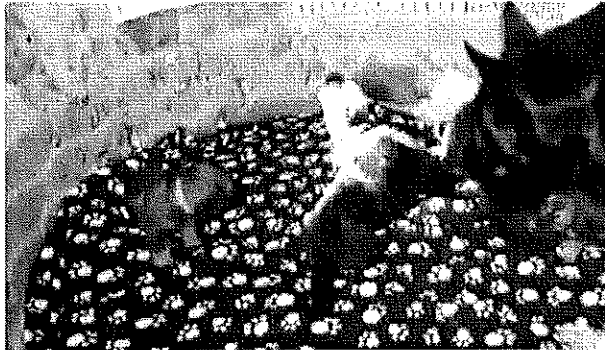
McIntyre 2011-09-27-0051-LTD-01



Vom Wenner Haus German Shepherds

March 7 at 1:28pm · 45

Puppies are two and a half weeks old down.. they're getting stronger and almost walking..... they're starting to play and doing just doing great



Vom Wenner Haus German Shepherds

February 19 at 8:47am · 45

Start of day 3 & mama and babies are all doing great ! everybody is gaining weight , some faster then others, very active and very very loud when they want to be...

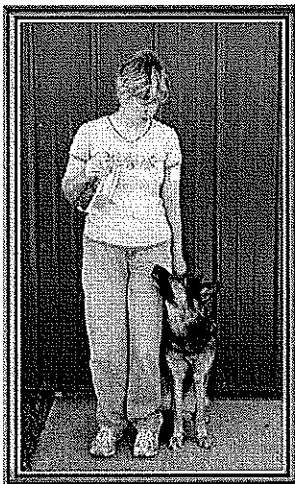
I'll have individual pictures later in the day.... still need to get caught up on some sleep 😊



Vom Wenner Haus German Shepherds with Vom Gildaf German Shepherds and Melinda Clark

July 1, 2014 · 45

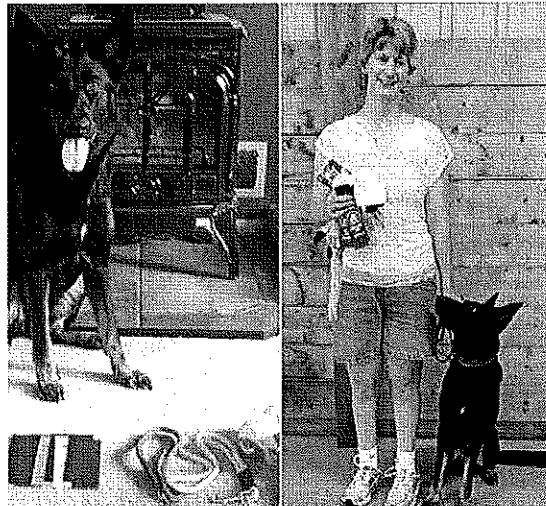
Ceyla finished her UKC Rally Championship I (UROC) this is her 28th title



Vom Wenner Haus German Shepherds added 2 new photos

June 23, 2014 · 45

Linea earned her 2nd legs in both Novice B and Rally Advanced on Sunday at the local GSD specialty... with a 2nd and 4th placings...



McIntyre 2011-09-27-0051-LTD-01



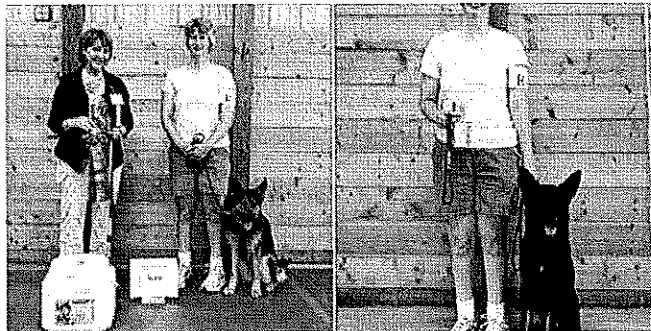
Vom Wenner Haus German Shepherds with Anna Asmusen and Jennifer Holtgrew
June 21, 2014 · Edited · 0

Today at the GSD local Specialty Ceyla took High Combine in Rally and Linea earned her first legs towards her Novice obedience title (2nd place) and Rally Advanced title (3rd place)...



Vom Wenner Haus German Shepherds added 2 new photos — with Melinda Clark and 2 others.
June 21, 2014 · Edited · 0

Today at the GSD local Specialty Ceyla took High Combine in Rally and Linea earned her first legs towards her Novice obedience title (2nd place) and Rally Advanced title (3rd place)...



The subject's website for Vom Wenner Haus appears to have been updated since our previous investigation. It notes that a litter of puppies were born on February 17th, 2015 from the last breeding session. The website can be seen below:

www.vomwennerhaus.com/index.htm

Home Males Females Puppies References Activities About Us Contact Us Links

WHAT A GERMAN SHEPHERD DOG SHOULD BE

Puppies Family Puppies

Welcome to Vom Wenner Haus!

Upcoming Litters!

Puppies Born: February 17th, 2015
5 Males and 2 Females

V Boy von Zarra SchH3 KKL1
"a1" normal, elbows normal, DH carrier

URO1 UAG1 Int CH UGRCH H'Linea von Holtgrew
BH BN RN OV TDI CGCA
"a" normal, elbows normal, DH clear, CERF normal

Expecting high quality, strong working dogs with wonderful temperaments suitable for sport/competition, SAR, Service/therapy dogs, etc. and active homes.

Click here to see more [\[INFORMATION\]](#) on this upcoming breeding....

All Puppies are spoken for. If you would like to be put on the waiting list for next year please contact me.

McIntyre 2011-09-27-0051-LTD-01

The subject was also still found to be associated with Key City Kennel Club and is still listed as a breeder for the German Shepherd Dog Club of Minneapolis and St. Paul, Inc.

A search of criminal, civil, and traffic court records was conducted in the areas where the subject has residential history. The search was conducted throughout the entire state of Minnesota. No new cases were uncovered.

We then checked with the U.S. Bankruptcy court to see if the subject has filed for bankruptcy since our last investigation. No records were found.

At this time we are terminating our secondary investigation into Melissa McIntyre. If further work is needed on this case please advise. We appreciate your business and look forward to working with you in the future.

From: Veasey, Michael <Michael.Veasey@rsli.com>
Sent: Friday, May 29, 2015 12:56 PM
To: MMorad@mi-pi.com
Subject: Fwd: RE: Re: Melissa McIntyre

Hi Marilyn,

Could you please confirm the request below for additional surveillance was received?

Thank you,

Michael Veasey

Reliance Standard Life Insurance
2001 Market St., Suite 1500
Philadelphia, PA 19103
Michael.Veasey@RSLI.com
Toll Free: 800-351-7500
(tel:8003517500) ext. 3890
Direct Line: (267) 256-3890
Fax: (267) 256-4262
(tel:2672564262)
>>> <twells@mi-pi.com> 5/27/2015 1:43 PM >>>

This message was sent securely using ZixCorp.
(<http://www.zixcorp.com/get-started/>)

Good Afternoon Mr. Veasey,

Thank you for issuing payment for the report...and you are more than welcome for me resending same.

I have notified the Surveillance Manager about the surveillance for Melissa McIntyre. You will receive an acknowledgement tomorrow.

Thank you, and have a great day.

Tina Wells

--- Originally sent by michael.veasey@rsli.com on May 27, 2015 11:57 AM ---

This message was sent securely using ZixCorp.
(<http://www.zixcorp.com/get-started/>)

Hi Tina,

I just issued payment for this report/invoice, thanks again for resending it.

Could you please set up surveillance on this claimant as well? I would like three days of surveillance completed. Please schedule for a Thursday, Saturday, and Monday, preferably during decent weather.

Thank you,

Michael Veasey
Reliance Standard Life Insurance
2001 Market St., Suite 1500
Philadelphia, PA 19103
Michael.Veasey@RSLI.com
Toll Free: 800-351-7500 ext. 3890
Direct Line: (267) 256-3890
Fax: (267) 256-4262
>>> Tina Wells <twells@mi-pi.com> 5/7/2015 3:14 PM >>>

Good Afternoon Mr. Veasey,
Attached is the report and invoice regarding Melissa McIntyre. It was previously sent to Kevin Foley.
Thank you, and have a great day.
Tina Wells

--

This message has been scanned for viruses and
dangerous content by MailScanner
(<http://www.mailscanner.info/>), and is
believed to be clean.

“CONFIDENTIALITY AND PROPRIETARY INFORMATION NOTICE: This email, including attachments, is covered by the Electronic Communications Privacy Act (18 U.S.C. 2510-2521) and contains confidential information belonging to the sender which may be legally privileged. The information is intended only for the use of the individual or entity to which it is addressed. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or the taking of any action in reliance of the contents of this information is strictly prohibited. If you have received this electronic transmission in error, please immediately notify the sender by return e-mail and delete this message from your computer or arrange for the return of any transmitted information.”

This message was secured by ZixCorp
(<http://www.zixcorp.com>) (R).

This message was secured by ZixCorp
(<http://www.zixcorp.com>) (R).

From: Veasey, Michael <Michael.Veasey@rsli.com>
Sent: Wednesday, July 8, 2015 4:01 PM
To: Bracey, Corrine
Subject: Possible Peer Review?

Hi Corrine,

Could you have a look at the RNR, updated meds, and surveillance report for claim 2011-09-27-0051-LTD-01?
I feel this might be a good candidate for Dr. Parke to take a look at, let me know what you think.

Regards,

Michael Veasey

Reliance Standard Life Insurance
2001 Market St., Suite 1500
Philadelphia, PA 19103
Michael.Veasey@RSLI.com
Toll Free: 800-351-7500
(tel:8003517500) ext. 3890
Direct Line: (267) 256-3890
Fax: (267) 256-4262
(tel:2672564262)

From: Myers, Alberta <Alberta.Myers@rsli.com>
Sent: Friday, April 20, 2012 2:42 PM
To: Ford, Nicole
Subject: Re: Melissa McIntyre LTD Claim 121690

This email has been referred to me for a reply.

Policy Number LSC 121690 Immanuel St. Joseph's-Mayo Health System States in part:

"Covered Monthly Earnings" means the Insured's monthly salary received from you on the day just before the date of Total Disability, prior to any deductions to a 401(k) or Section 125 plan. Covered Monthly Earnings does not include commissions, overtime pay, bonuses or any other special compensation not received as Covered Monthly Earnings.

If hourly paid employees are insured, the number of hours worked during a regular work week, not to exceed forty (40) hours per week, times 4.333, will be used to determine Covered Monthly Earnings. If an employee is paid on an annual basis, then the Covered Monthly Earnings will be determined by dividing the basic annual salary by 12.

So, take the claimant's hourly rate of pay x 40 x 4.333 = x 60% = Gross LTD benefit

The employer provided the hourly rate of pay via payroll records.

Alberta.Myers@rsli.com
Reliance Standard Life Insurance Co.
Two Commerce Square
Suite 1500
2001 Market St.
Philadelphia, PA 19103-7090
Fax 267 256 4262
Phone 267 256 3714>>> Nicole Ford 04/20/2012 12:50 PM >>> Hi Megan

The policyholder is in the middle of benefit audit by the department of labor. The auditor has requested the following information pertaining to the current claim.

1. Documentation showing how the claim amount was calculated under the Reliance policy for the McIntyre claim.

Is this something that you can provide?

Thanks

Nicole

Nicole R. Ford
Regional Account Manager
11010 Prairie Lakes Drive
Suite 280
Eden Prairie, MN 55344
952-252-2921
1-800-346-0410
952-854-6573 (Fax)

Claims and Evidence of Insurability status inquiries can be answered 24/7 on our website, www.RelianceStandard.com (<http://www.reliancestandard.com/>) (<http://www.reliancestandard.com/>), or through our automated Customer Care system: Call (800)351-7500. Customer Care Representatives are available at those toll-free number weekdays from 8:00 AM - 7:00 PM Eastern Time.

Please consider the environment before printing.

From: Ford, Nicole <Nicole.Ford@rsli.com>
Sent: Friday, April 20, 2012 12:51 PM
To: Corcoran, Megan
Subject: Melissa McIntyre LTD Claim 121690

Hi Megan

The policyholder is in the middle of benefit audit by the department of labor. The auditor has requested the following information pertaining to the current claim.

1. Documentation showing how the claim amount was calculated under the Reliance policy for the McIntyre claim.

Is this something that you can provide?

Thanks

Nicole

Nicole R. Ford
Regional Account Manager
11010 Prairie Lakes Drive
Suite 280
Eden Prairie, MN 55344
952-252-2921
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Please consider the environment before printing.

From: Ford, Nicole <Nicole.Ford@rsli.com>
Sent: Friday, April 20, 2012 2:47 PM
To: Myers, Alberta
Subject: Re: Melissa McIntyre LTD Claim 121690

THANK YOU!!!!

>>> Alberta Myers 4/20/2012 1:41 PM >>>
This email has been referred to me for a reply.

Policy Number LSC 121690 Immanuel St. Joseph's-Mayo Health System States in part:

"Covered Monthly Earnings" means the Insured's monthly salary received from you on the day just before the date of Total Disability, prior to any deductions to a 401(k) or Section 125 plan. Covered Monthly Earnings does not include commissions, overtime pay, bonuses or any other special compensation not received as Covered Monthly Earnings.

If hourly paid employees are insured, the number of hours worked during a regular work week, not to exceed forty (40) hours per week, times 4.333, will be used to determine Covered Monthly Earnings. If an employee is paid on an annual basis, then the Covered Monthly Earnings will be determined by dividing the basic annual salary by 12.

So, take the claimant's hourly rate of pay x 40 x 4.333 = x 60% = Gross LTD benefit

The employer provided the hourly rate of pay via payroll records.

Alberta.Myers@rsli.com
Reliance Standard Life Insurance Co.
Two Commerce Square
Suite 1500
2001 Market St.
Philadelphia, PA 19103-7090
Fax 267 256 4262
Phone 267 256 3714>>> Nicole Ford 04/20/2012 12:50 PM >>> Hi Megan

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Thanks

Nicole

Nicole R. Ford
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11010 Prairie Lakes Drive
Suite 280
Eden Prairie, MN 55344
952-252-2921
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Please consider the environment before printing.

From: Kristi Holland <kholland01@yahoo.com> <kholland01@yahoo.com>
Sent: Wednesday, March 25, 2015 9:05 AM
To: Holland, Kristi
Subject: Fwd: lululemon Sunday Yoga
Attachments: TEXT.htm_1; SOTM Contract April 2015.doc

Sent from my iPhone

Begin forwarded message:

> From: Kelsie McClellan <kelsiehardy@gmail.com>
> Date: March 24, 2015 at 5:31:36 PM CDT
> To: Kristi Holland <Kholland01@yahoo.com>
> Cc: Melissa McIntyre <mmcintyre@lululemon.com>
> Subject: lululemon Sunday Yoga
>
> Hi Kristi!
>
> Please see attached a studio of the month contract for the Sunday
> yoga class that you will be teaching on May 24th.
>
> Some of the information will not apply to you as you are teaching one Sunday and representing Lifetime for
that week instead of the entire month. If you have any flyers from Lifetime or any of your yoga classes, please
bring them.
>
> Also, you will be product tested an item in exchange for teaching at our store. You do not have to pick a mat,
you may pick a tank, pant or bra if you prefer.
>
> If you have any questions, please do not hesitate to contact me directly. I look forward to seeing you May
24th!
>
> Thank you,
> Kelsie
>
>
> kelsie hardy
> lululemon athletica
> Shops at Legacy
> store: 972.378.0572

--

This message has been scanned for viruses and dangerous content by MailScanner, and is believed to be clean.



STUDIO OF THE MONTH PROGRAM Shops at Legacy

WHAT WE OFFER OUR STUDIO OF THE MONTH...

Community Board: Our community board is the first thing you see when you walk in our store and is seen by most people that enter the store. Our community board creates an environment that is more than a retail store. It is a great tool for locals and tourists and contains information on yoga, yoga classes and studios, health resources, and events in the community. The information available on the community board creates an authentic environment of health in our store and as a result, our guests view lululemon as a resource in health, yoga, and wellness.

- You would want to bring in any flyers and/or promotional items that you have to highlight your studio
- Including schedules and/or free class passes for guests to take home (they LOVE this).

In Store Sunday Class: We host a complimentary 10:00am Sunday class led by different instructors from the community in our store a few times a week. We expect to have an average of 10-30 guests attend the class each week and it's a great way to introduce different styles of yoga and various fitness classes to a wide audience of exercise enthusiasts!

Product Tester Program: This is an authentic way we test product and generate feedback to continually innovate and create products by athletes for athletes.

- The instructor teaching the Sunday class will be product tested a mat of their choice. If the instructor is not in need of this complimentary yoga mat, please have them pay it forward to a student who could use one. It's what we like to call, "surprise and delight!"
- Feedback is at the heart of what makes lululemon athletica's product so great. After putting the product through the ringer, the instructor can give us the low down on what they love, what they don't and what they would change to make it the best in the world. **Please have them fill out the attached form and bring with them when they teach at our store.

Mini Web: Our mini website is an extension of our main website at www.lululemon.com/plano/plano and a virtual version of our community board. We refer guests to our mini website for information on our community events, classes and local yoga studios.

- Your studio will be featured as Studio of The Month and will include fun photos as well as links to your website. Please send us some photos when you send your list of instructors who will be teaching during the month.

Product Notification: We send out a product notification email to a growing list of over 1,000 guests every Tuesday. The purpose is to communicate to our guest's new product we have in the store and community event information including details for our upcoming Sunday morning yoga.

- Each product notification sent out to our guests the month you are featured will give a shout out to the instructor teaching that week and will include any other pertinent information.

Facebook: Social media is the way of our future! Our educators are all social media "gurus" who do an extraordinary job at keeping our store Facebook page funky and fresh.

- We can add information about classes you offer during the week.
- We will also create a feature on your studio to draw more visibility to your classes. Educators will be encouraged to update this page and to promote it among their friends/fans.

WHAT WE ASK IN RETURN...

Unlimited Classes for lululemon employees: Yoga is our roots. We are a yoga-inspired athletic apparel company and being out in the community and staying active is who we are and what we strive to represent. We support our local studios and participate in various classes and educate all our guests because we genuinely understand their overall functioning needs.

- Our employees have the opportunity to take unlimited classes at your yoga studio for the month you are featured in our store. This will give is an opportunity to familiarize ourselves with all of the classes you offer and most importantly with the instructors. This way, we will be able to authentically educate our guests on the store floor.
- We've created strong and trusting relationships with our guests when we talk about your studio because we have all experienced it ourselves and we will be able to motivate them about your studio with all of the yoga our staff is doing.

We are truly grateful and excited to be working with you and look forward to what our partnership will create!

RELIANCE STANDARD

LIFE INSURANCE COMPANY

Home Office: Chicago, Illinois • Administrative Office: Philadelphia, Pennsylvania

POLICYHOLDER: Mayo Clinic Health System - Mankato

POLICY NUMBER: LTD 121690

EFFECTIVE DATE: January 1, 2011, as amended through January 1, 2015

ANNIVERSARY DATES: January 1, 2012 and each January 1st thereafter.

PREMIUM DUE DATES: The first Premium is due on the Effective Date. Further Premiums are due monthly, in advance, on the first day of each month.

This Policy is delivered in Minnesota and is governed by its laws and/or the Employee Retirement Income Security Act of 1974 ("ERISA") as amended, where applicable.


Reliance Standard Life Insurance Company is referred to as "we", "our" or "us" in this Policy.


The Policyholder and any subsidiaries, divisions or affiliates are referred to as "you", "your" or "yours" in this Policy.

We agree to provide insurance to you in exchange for the payment of Premium and a signed Application. This Policy provides income replacement benefits for Total Disability from Sickness or Injury. It insures those Eligible Persons for the Monthly Benefit shown on the Schedule of Benefits. The insurance is subject to the terms and conditions of this Policy.

The Effective Date of this Policy is shown above. This Policy stays in effect as long as Premium is paid when due. The "TERMINATION OF THIS POLICY" section of the GENERAL PROVISIONS explains when the insurance terminates.

This Policy is signed by our President and Secretary.


Secretary


President

Countersigned _____

Licensed Resident Agent

GROUP LONG TERM DISABILITY INSURANCE NON-PARTICIPATING

This Long Term Disability Policy amends the Long Term Disability Policy previously issued to you by us. It is issued on February 4, 2015.

RSL001558

RELIANCE STANDARD LIFE INSURANCE COMPANY

Home Office: Chicago, Illinois
Administrative Office: Philadelphia, Pennsylvania

GROUP POLICY NUMBER: LTD 121690

POLICY EFFECTIVE DATE: January 1, 2011, as amended through January 1, 2015

POLICY DELIVERED IN: Minnesota

ANNIVERSARY DATE: January 1st in each year

Application is made to us by: Mayo Clinic Health System - Mankato

This Application is completed in duplicate, one copy to be attached to your Policy and the other returned to us.

It is agreed that this Application takes the place of any previous application for your Policy.

Signed at _____ this _____ day of _____.

Policyholder: _____

Agent: _____

By: _____
(Signature)

(Licensed Resident Agent)

(Title)

Please sign and return.

BC1COAPLTD 12169001/01/2015

*BC1COAPLTD 12169001/01/2015*RSL

*BC2COAPMayo Clinic Health System - Mankato

RSL001560

RELIANCE STANDARD LIFE INSURANCE COMPANY

Home Office: Chicago, Illinois
Administrative Office: Philadelphia, Pennsylvania

GROUP POLICY NUMBER: LTD 121690

POLICY EFFECTIVE DATE: January 1, 2011, as amended through January 1, 2015

POLICY DELIVERED IN: Minnesota

ANNIVERSARY DATE: January 1st in each year

Application is made to us by: Mayo Clinic Health System - Mankato

This Application is completed in duplicate, one copy to be attached to your Policy and the other returned to us.

It is agreed that this Application takes the place of any previous application for your Policy.

Signed at _____ this _____ day of _____.

Policyholder: _____

Agent: _____

By: _____
(Signature)

(Licensed Resident Agent)

(Title)

RSL001562

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SCHEDULE OF BENEFITS

NAME OF SUBSIDIARIES, DIVISIONS OR AFFILIATES TO BE COVERED: Waseca Medical Center, St James Medical Center, Springfield Medical Center

"Affiliate" means any corporation, partnership, or sole proprietor under the common control of the Policyholder.

ELIGIBLE CLASSES: Each active, Full-time Mankato Registered Nurse who are part of MNA, except any person employed on a temporary or seasonal basis.

WAITING PERIOD: 90 days of continuous employment.

INDIVIDUAL EFFECTIVE DATE: The first of the month coinciding with or next following completion of the Waiting Period.

INDIVIDUAL REINSTATEMENT: 12 months

MINIMUM PARTICIPATION REQUIREMENTS: Percentage: 75% Number of Insureds: 10

LONG TERM DISABILITY BENEFIT

ELIMINATION PERIOD: 90 consecutive days of Total Disability.

MONTHLY BENEFIT: The Monthly Benefit is an amount equal to 60% of Covered Monthly Earnings, payable in accordance with the section entitled Benefit Amount.

MINIMUM MONTHLY BENEFIT: In no event will the Monthly Benefit payable to an Insured be less than \$100.

MAXIMUM MONTHLY BENEFIT: \$10,000 (this is equal to a maximum Covered Monthly Earnings of \$16,667).

MAXIMUM DURATION OF BENEFITS: Benefits will not accrue beyond the longer of: the Duration of Benefits; or Normal Retirement Age; specified below:

Age at DisablementDuration of Benefits (in years)

61 or less	To Age 65
62	3 ½
63	3
64	2 ½
65	2
66	1 ¾
67	1 ½
68	1 ¼
69 or more	1

OR

Normal Retirement Age as defined by the 1983 Amendments to the United States Social Security Act and determined by the Insured's year of birth, as follows:

<u>Year of Birth</u>	<u>Normal Retirement Age</u>
1937 or before	65 years
1938	65 years and 2 months
1939	65 years and 4 months
1940	65 years and 6 months
1941	65 years and 8 months
1942	65 years and 10 months
1943 thru 1954	66 years
1955	66 years and 2 months
1956	66 years and 4 months
1957	66 years and 6 months
1958	66 years and 8 months
1959	66 years and 10 months
1960 and after	67 years

CHANGES IN MONTHLY BENEFIT: Increases in the Monthly Benefit are effective on the date of the change, provided the Insured is Actively at Work on the effective date of the change. If the Insured is not Actively at Work on that date, the effective date of the increase in the benefit amount will be deferred until the date the Insured returns to Active Work. Decreases in the Monthly Benefit are effective on the date the change occurs.

If an increase in, or initial application for, the Monthly Benefit is due to a life event change (such as marriage, birth or specific changes in employment status), proof of health will not be required provided the Insured applies within 31 days of such life event.

CONTRIBUTIONS: Insured: 100%

Contributions for the Insured are being made on a post-tax basis. For purposes of filing the Insured's Federal Income Tax Return, this means that under the law as of the date this Policy was issued, the Insured's Monthly Benefit might be treated as non-taxable. It is recommended that the Insured contact his/her personal tax advisor.

DEFINITIONS

"Actively at Work" and "Active Work" mean actually performing on a Full-time basis the material duties pertaining to his/her job in the place where and the manner in which the job is normally performed. This includes approved time off such as vacation, jury duty and funeral leave, but does not include time off as a result of an Injury or Sickness.

"Any Occupation" means an occupation normally performed in the national economy for which an Insured is reasonably suited based upon his/her education, training or experience.

"Claimant" means an Insured who makes a claim for benefits under this Policy for a loss covered by this Policy as a result of an Injury to or a Sickness of the Insured.

"Covered Monthly Earnings" means the Insured's monthly salary received from you on the day just before the date of Total Disability, prior to any deductions to a 401(k) and Section 125 plan. Covered Monthly Earnings does not include commissions, overtime pay, bonuses, incentive pay or any other special compensation not received as Covered Monthly Earnings.

If hourly paid employees are insured, the number of hours worked during a regular work week, not to exceed forty (40) hours per week, times 4.333, will be used to determine Covered Monthly Earnings. If an employee is paid on an annual basis, then the Covered Monthly Earnings will be determined by dividing the basic annual salary by 12.

"Eligible Person" means a person who meets the Eligibility Requirements of this Policy.

"Elimination Period" means a period of consecutive days of Total Disability, as shown on the Schedule of Benefits page, for which no benefit is payable. It begins on the first day of Total Disability.

Interruption Period: If, during the Elimination Period, an Insured returns to Active Work for less than 30 days, then the same or related Total Disability will be treated as continuous. Days that the Insured is Actively at Work during this interruption period will not count towards the Elimination Period. This interruption of the Elimination Period will not apply to an Insured who becomes eligible under any other group long term disability insurance plan.

"Full-time" means working for you for a minimum of 60 hours Per Pay Period.

"Hospital" or "Institution" means a facility licensed to provide care and Treatment for the condition causing the Insured's Total Disability.

"Injury" means bodily Injury resulting directly from an accident, independent of all other causes. The Injury must cause Total Disability which begins while insurance coverage is in effect for the Insured.

"Insured" means a person who meets the Eligibility Requirements of this Policy and is enrolled for this insurance.

"Physician" means a duly licensed practitioner who is recognized by the law of the state in which treatment is received as qualified to treat the type of Injury or Sickness for which claim is made. The Physician may not be the Insured or a member of his/her immediate family.

"Premium" means the amount of money needed to keep this Policy in force.

"Regular Care" means Treatment that is administered as frequently as is medically required according to guidelines established by nationally recognized authorities, medical research, healthcare organizations, governmental agencies or rehabilitative organizations. Care must be rendered personally by the Insured's Physician according to generally accepted medical standards in the Insured's locality, be of a demonstrable medical value and be necessary to meet his/her basic health needs.

"Regular Occupation" means the occupation the Insured is routinely performing when Total Disability begins. We will look at the Insured's occupation as it is normally performed in the national economy, and not the unique duties performed for a specific employer or in a specific locale.

"Retirement Benefits" mean money which the Insured is entitled to receive upon early or normal retirement or disability retirement under:

- (1) any plan of a state, county or municipal retirement system, if such pension benefits include any credit for employment with you;
- (2) Retirement Benefits under the United States Social Security Act of 1935, as amended or under any similar plan or act; or
- (3) an employer's retirement plan where payments are made in a lump sum or periodically and do not represent contributions made by an Insured.

Retirement Benefits do not include:

- (1) a federal government employee pension benefit;
- (2) a thrift plan;
- (3) a deferred compensation plan;
- (4) an individual retirement account (IRA);
- (5) a tax sheltered annuity (TSA);
- (6) a stock ownership plan; or
- (7) a profit sharing plan; or
- (8) section 401(k), 403(b) or 457 plans.

"Sickness" means illness or disease causing Total Disability which begins while insurance coverage is in effect for the Insured. Sickness includes pregnancy, childbirth, miscarriage or abortion, or any complications therefrom.

"Totally Disabled" and "Total Disability" mean, that as a result of an Injury or Sickness:

- (1) during the Elimination Period and for the first 24 months for which a Monthly Benefit is payable, an Insured cannot perform the material duties of his/her Regular Occupation;
 - (a) "Partially Disabled" and "Partial Disability" mean that as a result of an Injury or Sickness an Insured is capable of performing the material duties of his/her Regular Occupation on a part-time basis or some of the material duties on a full-time basis. An Insured who is Partially Disabled will be considered Totally Disabled, except during the Elimination Period;
 - (b) "Residual Disability" means being Partially Disabled during the Elimination Period. Residual Disability will be considered Total Disability; and
- (2) after a Monthly Benefit has been paid for 24 months, an Insured cannot perform the material duties of Any Occupation. We consider the Insured Totally Disabled if due to an Injury or Sickness he or she is capable of only performing the material duties on a part-time basis or part of the material duties on a full-time basis.

If an Insured is employed by you and requires a license for such occupation, the loss of such license for any reason does not in and of itself constitute "Total Disability".

"Treatment" means care consistent with the diagnosis of the Insured's Injury or Sickness that has its purpose of maximizing the Insured's medical improvement. It must be provided by a Physician whose specialty or experience is most appropriate for the Injury or Sickness and conforms with generally accepted medical standards to effectively manage and treat the Insured's Injury or Sickness.

CERTAIN RESPONSIBILITIES OF THE POLICYHOLDER

For the purposes of this Policy, you act on your behalf or as the employee's agent. Under no circumstances will you be deemed our agent.

Annual Enrollment Periods

It is your responsibility to provide us with written notice and obtain our written approval at least 31 days prior to conducting an annual enrollment period.

Compliance With Americans With Disabilities Act (ADA)

It is your responsibility to establish and maintain procedures which comply with the employer responsibilities of the Americans With Disabilities Act of 1990, as amended.

Compliance With The Employee Retirement Income Security Act (ERISA)

It is your responsibility to establish and maintain procedures which comply with the employer and/or Plan Administrator responsibilities of ERISA and the accompanying regulations, where applicable.

Distribution Of Certificates Of Insurance

A Certificate of Insurance will be provided to you for each Insured covered under this Policy. The Certificate will outline the insurance coverage, and explain the provisions, benefits and limitations of this Policy. It is your responsibility to distribute the appropriate Certificates and any updates or other notices from us to each Insured.

Maintenance Of Records

It is your responsibility to maintain sufficient records of each Insured's insurance, including additions, terminations and changes. We reserve the right to examine these records at the place where they are kept during normal business hours or at a place mutually agreeable to you and us. Such records must be maintained by you for at least 3 years after this Policy terminates.

Reporting Of Eligibility And Coverage Amounts

It is your responsibility to notify us on a timely basis of all individuals eligible for coverage under this Policy, of all individuals whose eligibility for coverage ends and of all changes in individual coverage amounts.

It is your responsibility to provide accurate census and salary information on all Insureds on or before each Anniversary Date, if we request such information.

Timely Payment Of Premiums

It is your responsibility to pay all premiums required under this Policy when due. Any change in the premium contribution basis must be approved by us.

TRANSFER OF INSURANCE COVERAGE

If an employee was covered under any group long term disability insurance plan maintained by you prior to this Policy's Effective Date, that employee will be insured under this Policy, provided that he/she is Actively At Work and meets all of the requirements for being an Eligible Person under this Policy on its Effective Date.

If an employee was covered under the prior group long term disability insurance plan maintained by you prior to this Policy's Effective Date, but was not Actively at Work due to Injury or Sickness on the Effective Date of this Policy and would otherwise qualify as an Eligible Person, coverage will be allowed under the following conditions:

- (1) The employee must have been insured with the prior carrier on the date of the transfer; and
- (2) Premiums must be paid; and
- (3) Total Disability must begin on or after this Policy's Effective Date.

If an employee is receiving long term disability benefits, becomes eligible for coverage under another group long term disability insurance plan, or has a period of recurrent disability under the prior group long term disability insurance plan, that employee will not be covered under this Policy. If premiums have been paid on the employee's behalf under this Policy, those premiums will be refunded.

Pre-existing Conditions Limitation Credit

If an employee is an Eligible Person on the Effective Date of this Policy, any time used to satisfy the Pre-existing Conditions Limitation of the prior group long term disability insurance plan will be credited towards the satisfaction of the Pre-existing Conditions Limitation of this Policy.

Waiting Period Credit

If an employee is an Eligible Person on the Effective Date of this Policy, any time used to satisfy any Waiting Period of the prior group long term disability insurance plan will be credited towards the satisfaction of the Waiting Period of this Policy.

GENERAL PROVISIONS

ENTIRE CONTRACT: The entire contract between you and us is this Policy, your Application (a copy of which is attached at issue) and any attached amendments.

CHANGES: No agent has authority to change or waive any part of this Policy. To be valid, any change or waiver must be in writing, signed by either our President, a Vice President, or a Secretary. The change or waiver must also be attached to this Policy.

TIME LIMIT ON CERTAIN DEFENSES: After this Policy has been in force for two (2) years from its Effective Date, no statement made by you shall be used to void this Policy; and no statement by any Insured on a written application for insurance shall be used to reduce or deny a claim after the Insured's insurance coverage, with respect to which claim has been made, has been in effect for two (2) years.

RECORDS MAINTAINED: You must maintain records of all Insureds. Such records must show the essential data of the insurance, including new persons, terminations, changes, etc. This information must be reported to us regularly. We reserve the right to examine the insurance records maintained at the place where they are kept. This review will only take place during normal business hours.

CLERICAL ERROR: Clerical errors in connection with this Policy or delays in keeping records for this Policy, whether by you, us, or the Plan Administrator:

- (1) will not terminate insurance that would otherwise have been effective; and
- (2) will not continue insurance that would otherwise have ceased or should not have been in effect.

If appropriate, a fair adjustment of premium will be made to correct a clerical error.

MISSTATEMENT OF AGE: If an Insured's age is misstated, the Premium will be adjusted. If the Insured's benefit is affected by the misstated age, it will also be adjusted. The benefit will be changed to the amount the Insured is entitled to at his/her correct age.

NOT IN LIEU OF WORKERS' COMPENSATION: This Policy is not a Workers' Compensation Policy. It does not provide Workers' Compensation benefits.

CONFORMITY WITH STATE LAWS: Any section of this Policy, which on its Effective Date, conflicts with the laws of the state in which this Policy is issued, is amended by this provision. This Policy is amended to meet the minimum requirements of those laws.

CERTIFICATE OF INSURANCE: We will send to you an individual certificate for each Insured. The certificate will outline the insurance coverage, state this Policy's provisions that affect the Insured, and explain to whom benefits are payable.

TERMINATION OF THIS POLICY: You may cancel this Policy at any time by giving us written notice. This Policy will be cancelled on the date we receive your notice or, if later, the date requested in your notice.

This Policy will terminate at the end of the Grace Period if Premium has not been paid by that date.

We may cancel this Policy within thirty-one (31) days of written notice prior to the date of cancellation, only:

- (1) if the number of Insureds is less than the Minimum Participation Number shown on the Schedule of Benefits; or
- (2) if the percentage of Eligible Persons insured is less than the Minimum Participation Percentage shown on the Schedule of Benefits.

You will still owe us any Premium that is not paid up to the date this Policy is cancelled. We will return, pro-rata, any part of the Premium paid beyond the date this Policy is cancelled.

Termination of this Policy will not affect any claim which was covered prior to termination, subject to the terms and conditions of this Policy.

CLAIMS PROVISIONS

NOTICE OF CLAIM: Written notice must be given to us within thirty-one (31) days after a Total Disability covered by this Policy occurs, or as soon as reasonably possible. The notice should be sent to us at our Administrative Office or to our authorized agent. The notice should include your name, the Policy Number and the Insured's name.

CLAIM FORMS: When we receive the notice of claim, we will send the Claimant the claim forms to file with us. We will send them within fifteen (15) days after we receive notice. If we do not, then proof of Total Disability will be met by giving us a written statement of the type and extent of the Total Disability. The statement must be sent within ninety (90) days after the loss began.

WRITTEN PROOF OF TOTAL DISABILITY: For any Total Disability covered by this Policy, written proof must be sent to us within ninety (90) days after the Total Disability occurs. If written proof is not given in that time, the claim will not be invalidated nor reduced if it is shown that written proof was given as soon as was reasonably possible. In any event, proof must be given within one (1) year after the Total Disability occurs, unless the Claimant is legally incapable of doing so.

PAYMENT OF CLAIMS: When we receive written proof of Total Disability covered by this Policy, we will pay any benefits due. Benefits that provide for periodic payment will be paid for each period as we become liable.

We will pay benefits to the Insured, if living, or else to his/her estate.

If the Insured has died and we have not paid all benefits due, we may pay up to \$1,000 to any relative by blood or marriage, or to the executor or administrator of the Insured's estate. The payment will only be made to persons entitled to it. An expense incurred as a result of the Insured's last illness, death or burial will entitle a person to this payment. The payments will cease when a valid claim is made for the benefit. We will not be liable for any payment we have made in good faith.

Reliance Standard Life Insurance Company shall serve as the claims review fiduciary with respect to the insurance policy and the Plan. The claims review fiduciary has the discretionary authority to interpret the Plan and the insurance policy and to determine eligibility for benefits. Decisions by the claims review fiduciary shall be complete, final and binding on all parties.

ARBITRATION OF CLAIMS: Any claim or dispute arising from or relating to our determination regarding the Insured's Total Disability may be settled by arbitration when agreed to by the Insured and us in accordance with the Rules for Health and Accident Claims of the American Arbitration Association or by any other method agreeable to the Insured and us. In the case of a claim under an Employee Retirement Income Security Act (hereinafter referred to as ERISA) Plan, the Insured's ERISA claim appeal remedies, if applicable, must be exhausted before the claim may be submitted to arbitration. Judgment upon the award rendered by the arbitrators may be entered in any court having jurisdiction over such awards.

Unless otherwise agreed to by the Insured and us, any such award will be binding on the Insured and us for a period of twelve (12) months after it is rendered assuming that the award is not based on fraudulent information and the Insured continues to be Totally Disabled. At the end of such twelve (12) month period, the issue of Total Disability may again be submitted to arbitration in accordance with this provision.

Any costs of said arbitration proceedings levied by the American Arbitration Association or the organization or person(s) conducting the proceedings will be paid by us.

PHYSICAL EXAMINATION AND AUTOPSY: We will, at our expense, have the right to have a Claimant interviewed and/or examined:

- (1) physically;
- (2) psychologically; and/or
- (3) psychiatrically;

to determine the existence of any Total Disability which is the basis for a claim. This right may be used as often as it is reasonably required while a claim is pending.

We can have an autopsy made unless prohibited by law.

LEGAL ACTIONS: No legal action may be brought against us to recover on this Policy within sixty (60) days after written proof of loss has been given as required by this Policy. No action may be brought after three (3) years (Kansas, five (5) years; South Carolina, six (6) years) from the time written proof of loss is received.

INDIVIDUAL ELIGIBILITY, EFFECTIVE DATE AND TERMINATION

GENERAL GROUP: The general group will be your employees and employees of any subsidiaries, divisions or affiliates named on the Schedule of Benefits page.

ELIGIBILITY REQUIREMENTS: A person is eligible for insurance under this Policy if he/she:

- (1) is a member of an Eligible Class, as shown on the Schedule of Benefits page; and
- (2) has completed the Waiting Period, as shown on the Schedule of Benefits page.

WAITING PERIOD: A person who is continuously employed on a Full-time basis with you for the period specified on the Schedule of Benefits page has satisfied the Waiting Period.

EFFECTIVE DATE OF INDIVIDUAL INSURANCE: If you pay the entire Premium due for an Eligible Person, the insurance for such Eligible Person will go into effect on the Individual Effective Date, as shown on the Schedule of Benefits page.

If an Eligible Person pays a part of the Premium, he/she must apply in writing for the insurance to go into effect. He/she will become insured on the latest of:

- (1) the Individual Effective Date as shown on the Schedule of Benefits page, if he/she applies on or before that date;
- (2) on the first of the month coinciding with or next following the date he/she applies, if he/she applies within thirty-one (31) days from the date he/she first met the Eligibility Requirements; or
- (3) on the first of the month coinciding with or next following the date we approve any required proof of health acceptable to us. We require this proof if a person applies:
 - (a) after thirty-one (31) days from the date he/she first met the Eligibility Requirements; or
 - (b) after he/she terminated this insurance but remained in an Eligible Class as shown on the Schedule of Benefits page; or
 - (c) after being eligible for coverage under a prior plan for more than thirty-one (31) days but did not elect to be covered under that prior plan.

The insurance for an Eligible Person will not go into effect on a date he/she is not Actively at Work because of a Sickness or Injury. The insurance will go into effect after the person is Actively at Work for one (1) full day in an Eligible Class, as shown on the Schedule of Benefits page.

TERMINATION OF INDIVIDUAL INSURANCE: The insurance of an Insured will terminate on the first of the following to occur:

- (1) the date this Policy terminates;
- (2) the date the Insured ceases to meet the Eligibility Requirements;
- (3) the end of the period for which Premium has been paid for the Insured; or
- (4) the date the Insured enters military service (not including Reserve or National Guard).

INDIVIDUAL REINSTATEMENT: The insurance of a terminated person may be reinstated if he/she returns to Active Work with you within the period of time as shown on the Schedule of Benefits page. He/she must also be a member of an Eligible Class, as shown on the Schedule of Benefits page, and have been:

- (1) on a leave of absence approved by you; or
- (2) on temporary lay-off; or
- (3) rehired

The person will not be required to fulfill the Eligibility Requirements of this Policy again. The insurance will go into effect after he/she returns to Active Work for one (1) full day. If a person returns after terminating insurance at his/her request or for failure to pay Premium when due, proof of health acceptable to us must be submitted before he/she may be reinstated.

PREMIUMS

PREMIUM PAYMENT: All Premiums are to be paid by you to us, or to an authorized agent, on or before the due date. The Premium Due Dates are stated on this Policy's face page.

PREMIUM RATE: The Premium due will be the rate per \$100.00 of the entire amount of Covered Monthly Earnings then in force. We will furnish to you the Premium Rate on this Policy's Effective Date and when it is changed. We have the right to change the Premium Rate:

- (1) when the extent of coverage is changed by amendment;
- (2) on any Premium Due Date after the second Policy Anniversary;
- (3) on any Premium Due Date on or after the first Policy Anniversary if your entire group's Covered Monthly Earnings changes by 15% or more from such group's Covered Monthly Earnings on this Policy's Effective Date; or
- (4) at any time if there is a change in federal or state laws, insurance programs or retirement benefits that would impact our liability.

We will not change the Premium Rate due to (2) or (3) above more than once in any twelve (12) month period. We will tell you in writing at least thirty-one (31) days before the date of a change due to (2), (3) or (4) above.

GRACE PERIOD: You may pay the Premium up to sixty (60) days after the date it is due. This Policy stays in force during this time. If the Premium is not paid during the grace period, this Policy will terminate. You will still owe us the Premium up to the date this Policy terminates.

WAIVER OF PREMIUM: No Premium is due us for an Insured while he/she is receiving Monthly Benefits from us. Once Monthly Benefits cease due to the end of his/her Total Disability, Premium payments must begin again if insurance is to continue.

BENEFIT PROVISIONS

INSURING CLAUSE: We will pay a Monthly Benefit if an Insured:

- (1) is Totally Disabled as the result of a Sickness or Injury covered by this Policy;
- (2) is under the regular care of a Physician;
- (3) has completed the Elimination Period; and
- (4) submits satisfactory proof of Total Disability to us.

BENEFIT AMOUNT: To figure the benefit amount payable:

- (1) multiply an Insured's Covered Monthly Earnings by the benefit percentage(s), as shown on the Schedule of Benefits page;
- (2) take the lesser of the amount:
 - (a) of step (1) above; or
 - (b) the Maximum Monthly Benefit, as shown on the Schedule of Benefits page; and
- (3) subtract Other Income Benefits, as shown below, from step (2) above.

We will pay at least the Minimum Monthly Benefit, as shown on the Schedule of Benefits page.

OTHER INCOME BENEFITS: Other Income Benefits are:

- (1) disability income benefits an Insured is eligible to receive because of his/her Total Disability under any group insurance plan(s);
- (2) disability income benefits an Insured is eligible to receive because of his/her Total Disability under any governmental retirement system, except benefits payable under a federal government employee pension benefit;
- (3) all benefits (except medical or death benefits) including any settlement made in place of such benefits (whether or not liability is admitted) an Insured is eligible to receive because of his/her Total Disability under:
 - (a) Workers' Compensation Laws;
 - (b) occupational disease law;
 - (c) any other laws of like intent as (a) or (b) above; and
 - (d) any compulsory benefit law (except benefits payable under the Minnesota No-Fault Motor Vehicle Law);
- (4) any of the following that the Insured is eligible to receive from you:
 - (a) any formal salary continuance plan;
 - (b) wages, salary or other compensation, excluding the amount allowable when engaged in Rehabilitative Employment; and
 - (c) commissions or monies, including vested renewal commissions, but, excluding commissions or monies that the Insured earned prior to Total Disability which are paid after Total Disability has begun;
- (5) that part of disability benefits paid for by you that an Insured is eligible to receive because of his/her Total Disability under a group retirement plan; and
- (6) that part of Retirement Benefits paid for by you that an Insured is eligible to receive under a group retirement plan; and
- (7) disability or Retirement Benefits under the United States Social Security Act, the Canadian pension plans, or any other government plan for which an Insured is eligible to receive because of his/her Total Disability or eligibility for Retirement Benefits. Only the Insured's benefit will be included under this item. We will not include benefits paid for his/her spouse or children.

Disability and early Retirement Benefits will be offset only if such benefits are elected by the Insured or do not reduce the amount of his/her accrued normal Retirement Benefits then funded.

Retirement Benefits under number (7) above will not apply to disabilities which begin after age 70 for those Insureds already receiving Social Security Retirement Benefits while continuing to work beyond age 70.

Benefits above will be estimated if the benefits:

- (1) have not been applied for; or
- (2) have been applied for and a decision is pending; or
- (3) have been denied and the denial may be appealed.

The Monthly Benefit will be reduced by the estimated amount. If benefits have been estimated, the Monthly Benefit will be adjusted when we receive proof:

- (1) of the amount awarded; or
- (2) that benefits have been denied and the denial cannot be further appealed.

If we have underpaid any benefit for any reason, we will make a lump sum payment. If we have overpaid any benefit for any reason, the overpayment must be repaid to us. At our option, we may reduce the Monthly Benefit or ask for a lump sum refund. If we reduce the Monthly Benefit, the Minimum Monthly Benefit, if any, as shown on the Schedule of Benefits page, would not apply. Interest does not accrue on any underpaid or overpaid benefit unless required by applicable law.

For each day of a period of Total Disability less than a full month, the amount payable will be 1/30th of the Monthly Benefit.

COST OF LIVING FREEZE: After the initial deduction for any Other Income Benefits, the Monthly Benefit will not be further reduced due to any cost of living increases payable under these Other Income Benefits.

LUMP SUM PAYMENTS: If Other Income Benefits are paid in a lump sum, the sum will be prorated over the period of time to which the Other Income benefits apply. If no period of time is given, the sum will be prorated over sixty (60) months.

TERMINATION OF MONTHLY BENEFIT: The Monthly Benefit will stop on the earliest of:

- (1) the date the Insured ceases to be Totally Disabled;
- (2) the date the Insured dies;
- (3) the Maximum Duration of Benefits, as shown on the Schedule of Benefits page, has ended;
- (4) the date the Insured fails to furnish the required proof of Total Disability.

RECURRENT DISABILITY: If, after a period of Total Disability for which benefits are payable, an Insured returns to Active Work for at least six (6) consecutive months, any recurrent Total Disability for the same or related cause will be part of a new period of Total Disability. A new Elimination Period must be completed before any further Monthly Benefits are payable.

If an Insured returns to Active Work for less than six (6) months, a recurrent Total Disability for the same or related cause will be part of the same Total Disability. A new Elimination Period is not required. Our liability for the entire period will be subject to the terms of this Policy for the original period of Total Disability.

This Recurrent Disability section will not apply to an Insured who becomes eligible for insurance coverage under any other group long term disability insurance plan.

WORKSITE MODIFICATION PROVISION

If an Insured is Totally Disabled, participating in a rehabilitation program and receiving a Monthly Benefit and he/she is able to return to Active Work should you make a modification to the Insured's worksite, then you may be eligible for Worksite Modification Reimbursement.

You will be reimbursed for 100% of the actual and reasonable expenses paid for eligible worksite modifications to accommodate the Insured's return to Active Work, up to a maximum reimbursement of \$2,000.00.

Eligible worksite modifications include:

1. providing the Insured with a more accessible parking space or entrance; or
2. removing items from the worksite which represent barriers or hazards to the Insured; or
3. special seating, furniture or equipment for the Insured's work station; or
4. providing special training materials or translation services during the Insured's training; or
5. any other services that we deem necessary to help the Insured return to Active Work with you.

In order for this reimbursement to be payable, the Insured must have a Total Disability that results solely from the Insured's inability to perform his or her Regular Occupation at your worksite. The Insured must also have the physical and mental abilities needed to perform his or her Regular Occupation or another occupation at your worksite, but only with the help of the proposed worksite modification.

A worksite modification may first be proposed by either you, the Insured or his or her Physician, or by us. A written proposal must then be developed with input from you, the Insured or his or her Physician. The proposal must state the purpose of the proposed worksite modification, the times, dates and costs of the modifications. Any proposal must be in writing and is subject to our approval, your approval and the approval of the Insured prior to any reimbursement being paid.

Once the worksite modification has been approved in writing, you must make the worksite modification. Upon receipt of proof satisfactory to us that the modifications for the Insured have been made as approved and you have paid the person or organization that provided the worksite modification, we will then reimburse you up to the limit shown above.

EXCLUSIONS

We will not pay a Monthly Benefit for any Total Disability caused by:

- (1) an act of war, declared or undeclared; or
- (2) an intentionally self-inflicted Injury; or
- (3) commission of or attempt to commit a felony and/or being engaged in an illegal occupation.

LIMITATIONS

MENTAL OR NERVOUS DISORDERS: Monthly Benefits for Total Disability caused by or contributed to by mental or nervous disorders will not be payable beyond an aggregate lifetime maximum duration of twenty-four (24) months unless the Insured is in a Hospital or Institution at the end of the twenty-four (24) month period. The Monthly Benefit will be payable while so confined, but not beyond the Maximum Duration of Benefits.

If an Insured was confined in a Hospital or Institution and:

- (1) Total Disability continues beyond discharge;
- (2) the confinement was during a period of Total Disability; and
- (3) the period of confinement was for at least fourteen (14) consecutive days;

then upon discharge, Monthly Benefits will be payable for the greater of:

- (1) the unused portion of the twenty-four (24) month period; or
- (2) ninety (90) days;

but in no event beyond the Maximum Duration of Benefits, as shown on the Schedule of Benefits page.

Mental or Nervous Disorders are defined to include disorders which are diagnosed to include a condition such as:

- (1) bipolar disorder (manic depressive syndrome);
- (2) schizophrenia;
- (3) delusional (paranoid) disorders;
- (4) psychotic disorders;
- (5) depressive disorders;
- (6) anxiety disorders;
- (7) somatoform disorders (psychosomatic illness);
- (8) eating disorders; or
- (9) mental illness.

PRE-EXISTING CONDITIONS: Benefits will not be paid for a Total Disability:

- (1) caused by;
- (2) contributed to by; or
- (3) resulting from;

a Pre-existing Condition unless the Insured has been Actively at Work for one (1) full day following the end of twelve (12) consecutive months from the date he/she became an Insured.

"Pre-Existing Condition" means any Sickness or Injury for which the Insured received medical Treatment, consultation, care or services, including diagnostic procedures, or took prescribed drugs or medicines, during the three (3) months immediately prior to the Insured's effective date of insurance.

SPECIFIC INDEMNITY BENEFIT

If the Insured suffers any one of the Losses listed below from an accident resulting in an Injury, we will pay a guaranteed minimum number of Monthly Benefit payments, as shown below. However:

- (1) the Loss must occur within one hundred and eighty (180) days; and
- (2) the Insured must live past the Elimination Period.

For Loss of:

Number of Monthly Benefit Payments:

Both Hands.....	46 Months
Both Feet.....	46 Months
Entire Sight in Both Eyes.....	46 Months
Hearing in Both Ears.....	46 Months
Speech.....	46 Months
One Hand and One Foot.....	46 Months
One Hand and Entire Sight in One Eye.....	46 Months
One Foot and Entire Sight in One Eye.....	46 Months
One Arm.....	35 Months
One Leg.....	35 Months
One Hand.....	23 Months
One Foot.....	23 Months
Entire Sight in One Eye.....	15 Months
Hearing in One Ear.....	15 Months

"Loss(es)" with respect to:

- (1) hand or foot, means the complete severance through or above the wrist or ankle joint;
- (2) arm or leg, means the complete severance through or above the elbow or knee joint; or
- (3) sight, speech or hearing, means total and irrecoverable Loss thereof.

If more than one (1) Loss results from any one accident, payment will be made for the Loss for which the greatest number of Monthly Benefit payments is provided.

The amount payable is the Monthly Benefit, as shown on the Schedule of Benefits page, with no reduction from Other Income Benefits. The number of Monthly Benefit payments will not cease if the Insured returns to Active Work.

If death occurs after we begin paying Monthly Benefits, but before the Specific Indemnity Benefit has been paid according to the above schedule, the balance remaining at time of death will be paid to the Insured's estate, unless a beneficiary is on record with us under this Policy.

Benefits may be payable longer than shown above as long as the Insured is still Totally Disabled, subject to the Maximum Duration of Benefits, as shown on the Schedule of Benefits page.

SURVIVOR BENEFIT - LUMP SUM

We will pay a benefit to an Insured's Survivor when we receive proof that the Insured died while:

- (1) he/she was receiving Monthly Benefits from us; and
- (2) he/she was Totally Disabled for at least one hundred and eighty (180) consecutive days.

The benefit will be an amount equal to 3 times the Insured's last Monthly Benefit. The last Monthly Benefit is the benefit the Insured was eligible to receive right before his/her death. It is not reduced by wages earned while in Rehabilitative Employment.

A benefit payable to a minor may be paid to the minor's legally appointed guardian. If there is no guardian, at our option, we may pay the benefit to an adult that has, in our opinion, assumed the custody and main support of the minor. We will not be liable for any payment we have made in good faith.

"Survivor" means an Insured's spouse. If the spouse dies before the Insured or if the Insured was legally separated, then the Insured's natural, legally adopted or step-children, who are under age twenty-five (25) will be the Survivors. If there are no eligible Survivors, payment will be made to the Insured's estate, unless a beneficiary is on record with us under this Policy.

WORK INCENTIVE AND CHILD CARE BENEFITS

WORK INCENTIVE BENEFIT

During the first twelve (12) months of Rehabilitative Employment during which a Monthly Benefit is payable, we will not offset earnings from such Rehabilitative Employment until the sum of:

- (1) the Monthly Benefit prior to offsets with Other Income Benefits; and
- (2) earnings from Rehabilitative Employment;

exceed 100% of the Insured's Covered Monthly Earnings. If the sum above exceeds 100% of Covered Monthly Earnings, our Benefit Amount will be reduced by such excess amount until the sum of (1) and (2) above equals 100%.

CHILD CARE BENEFIT

We will allow a Child Care Benefit to an Insured if:

- (1) the Insured is receiving benefits under the Work Incentive Benefit;
- (2) the Insured's Child(ren) is (are) under 14 years of age;
- (3) the child care is provided by a non-relative; and
- (4) the charges for child care are documented by a receipt from the caregiver, including social security number or taxpayer identification number.

During the twelve (12) month period in which the Insured is eligible for the Work Incentive Benefit, an amount equal to actual expenses incurred for child care, up to a maximum of \$250.00 per month, will be added to the Insured's Covered Monthly Earnings when calculating the Benefit Amount under the Work Incentive Benefit.

Child(ren) means: the Insured's unmarried child(ren), including any foster child, adopted child or step child who resides in the Insured's home and is financially dependent on the Insured for support and maintenance.

**EXTENSION OF COVERAGE UNDER THE FAMILY AND MEDICAL LEAVE ACT AND UNIFORMED SERVICES
EMPLOYMENT AND REEMPLOYMENT RIGHTS ACT (USERRA)**

Family and Medical Leave of Absence:

We will continue the Insured's coverage in accordance with your policies regarding leave under the Family and Medical Leave Act of 1993, as amended, or any similar state law, as amended, if:

- (1) the premium for such Insured continues to be paid during the leave; and
- (2) you have approved the Insured's leave in writing and provide a copy of such approval within thirty-one (31) days of our request.

As long as the above requirements are satisfied, we will continue coverage until the later of:

- (1) the end of the leave period required by the Family and Medical Leave Act of 1993, as amended; or
- (2) the end of the leave period required by any similar state law, as amended.

Military Services Leave of Absence:

We will continue the Insured's coverage in accordance with your policies regarding Military Services Leave of Absence under USERRA if the premium for such Insured continues to be paid during the leave.

As long as the above requirement is satisfied, we will continue coverage until the end of the period required by USERRA.

This Policy, while coverage is being continued under this Military Services Leave of Absence extension, does not cover any loss which occurs while on active duty in the military if such loss is caused by or arises out of such military service, including but not limited to war or any act of war, whether declared or undeclared.

While the Insured is on a Family and Medical Leave of Absence for any reason other than his or her own illness, injury or disability or Military Services Leave of Absence he or she will be considered Actively at Work. Any changes such as revisions to coverage due to age, class or salary changes, as applicable, will apply during the leave except that increases in the amount of insurance, whether automatic or subject to election, will not be effective for an Insured who is not considered Actively at Work until the Insured has returned to Active Work for one (1) full day.

A leave of absence taken in accordance with the Family and Medical Leave Act of 1993 or USERRA will run concurrently with any other applicable continuation of insurance provision in this Policy.

The Insured's coverage will cease under this extension on the earliest of:

- (1) the date this Policy terminates; or
- (2) the end of the period for which premium has been paid for the Insured; or
- (3) the date such leave should end in accordance with your policies regarding Family and Medical Leave of Absence and Military Services Leave of Absence in compliance with the Family and Medical Leave Act of 1993, as amended and USERRA. Coverage will not be terminated for an Insured who becomes Totally Disabled during the period of the leave and who is eligible for benefits according to the terms of this Policy. Any Monthly Benefit which becomes payable will be based on the Insured's Covered Monthly Earnings immediately prior to the date of Total Disability.

Should you choose not to continue the Insured's coverage during a Family and Medical Leave of Absence and/or Military Services Leave of Absence, the Insured's coverage will be reinstated.

EXTENDED DISABILITY BENEFIT

We will pay an Extended Disability Benefit to an Insured if the Insured:

- (1) meets all the requirements of Total Disability of this Policy; and
- (2) is receiving a Total Disability Benefit under this Policy that will be exhausted because the Maximum Duration of Benefits has ended; and
- (3) is unable to function without another person's Direct Assistance or verbal direction due to:
 - (a) an inability to perform at least two Activities of Daily Living (ADL) as defined; or
 - (b) Cognitive Impairment as defined; and
- (4) is either:
 - (a) confined as an Inpatient in a Skilled Nursing Home, Rehabilitation Facility or Rehabilitative Hospital in which patients receive care from licensed medical professionals; or
 - (b) receiving Home Health Care or Hospice Care; and
- (5) makes a Written Request for this benefit within thirty (30) days after the Maximum Duration of Benefits has ended.

The Extended Disability Benefit:

- (1) will be an amount equal to 85% of the Monthly Benefit after offsets with Other Income Benefits which was payable prior to the Insured qualifying for the Extended Disability Benefit up to a maximum of \$5,000 per month; and
- (2) is payable for a maximum of sixty (60) months measured from the date that the Maximum Duration of Benefits has ended.

Definitions:

"Activities of Daily Living (ADL)" means:

- (1) Bathing - the ability to wash oneself in the tub or shower or by sponge bath from a basin without Direct Assistance;
- (2) Dressing - the ability to change clothes without Direct Assistance, including fastening and unfastening any medically necessary braces or artificial limbs;
- (3) Eating/Feeding - the ability to eat without Direct Assistance, once food has been prepared and made available;
- (4) Transferring - the ability to move in and out of a chair or bed without Direct Assistance, except with the aid of equipment (including support and other mechanical devices); and
- (5) Toileting - the ability to get to and from and on and off the toilet, to maintain a reasonable level of personal hygiene and to adjust clothing without Direct Assistance.

"Cognitively Impaired" and "Cognitive Impairment" means the Insured's confusion or disorientation due to organic changes in the brain resulting in a deterioration or loss in intellectual capacity as confirmed by cognitive or other tests satisfactory to us.

"Direct Assistance" means the Insured requires continuous help or oversight to be able to perform the Activity of Daily Living (ADL).

"Home Health Care" means medical and non-medical services, provided in an Insured's residence due to Injury or Sickness, including: visiting nurse services; physical, respiratory, occupational or speech therapy; nutritional counseling; and home health aide services. Home Health Care services must be: (1) prescribed by and provided under the supervision of a Physician; and (2) rendered by a licensed home health care provider who is not a member of the Insured's immediate family. Home Health Care does not include: homemaker, companion and home delivered meals services; nor informal care services provided by family members of the Insured.

"Hospice Care" means a program of care which coordinates the special needs of a person with a Terminal Illness. Hospice Care must be: (1) prescribed by and provided under the supervision of a Physician; and (2) rendered by a licensed hospice care provider who is not a member of the Insured's immediate family.

"Inpatient" means a person confined in a Skilled Nursing Home, Rehabilitation Facility or Rehabilitative Hospital, for whom a daily room and board charge is made.

"Pre-existing Condition" means with respect to the Extended Disability Benefit only, any Sickness or Injury for which the Insured received medical treatment, consultation, care or services, including diagnostic procedures, or took prescribed drugs or medicines, during the three (3) months immediately preceding the Insured's effective date of insurance.

"Rehabilitation Facility or Rehabilitative Hospital" means any facility or Hospital that is licensed in the state in which it is operating to provide rehabilitation services, therapy or retraining to the Insured to enable him or her to walk, communicate, and/or function as a member of society.

"Skilled Nursing Home" means a facility or part of a facility that is licensed or certified in the state in which it is operating to provide Skilled Nursing Care.

"Skilled Nursing Care" means that level of care which:

- (1) requires the training and skills of a Registered Nurse;
- (2) is prescribed by a Physician;
- (3) is based on generally recognized and accepted standards of health care by the American Medical Association; and
- (4) is appropriate for the diagnosis and treatment of the Insured's Sickness or Injury.

"Terminal Illness" means a Sickness or physical condition that is certified by a Physician in a written statement, on a form prescribed by us, to reasonably be expected to result in death in less than 12 months.

"Written Request" means a request made, in writing, by the Insured to us.

Pre-existing Conditions Limitation:

With respect to the Extended Disability Benefit only, benefits will not be paid for a Total Disability:

- (1) caused by;
- (2) contributed to by; or
- (3) resulting from;

a Pre-existing Condition unless the Insured has been Actively at Work for one (1) full day following the end of twelve (12) consecutive months measured from the Insured's effective date of insurance with us.

No benefits will be paid under the Extended Disability Benefit if the Insured's Total Disability occurred before the Insured's effective date of insurance with us.

The Extended Disability Benefit will cease to be payable on the earliest of the following dates:

- (1) the date the Insured dies; or
- (2) the date the Insured no longer meets the requirements of Total Disability of this Policy; or
- (3) the date the Insured:
 - (a) is no longer confined as an Inpatient in a Skilled Nursing Home, Rehabilitative Facility or Rehabilitation Hospital; or
 - (b) is no longer receiving Home Health Care or Hospice Care; or
- (4) the date the Insured is no longer considered Cognitively Impaired; or
- (5) the date the Insured is no longer unable to perform at least two Activities of Daily Living (ADL); or
- (6) the date the Insured receives his or her sixtieth (60th) monthly Extended Disability Benefit payment.

The Extended Disability Benefit will not be payable for Total Disability which is caused by or results from conditions for which Monthly Benefits are specifically limited by this Policy such as Mental or Nervous Disorders, alcoholism, drug addiction, or other Substance Abuse, musculoskeletal and connective tissue disorders, chronic fatigue syndrome, Environmental Allergic or Reactive Illness, or Self-Reported Conditions.

If this Policy contains a Survivor Benefit, Activities of Daily Living Benefit (ADL), Catastrophic Care Benefit, Supplemental Pension Benefit, Living Benefit, Cost of Living Benefit or a Conversion Privilege, such benefits are not applicable when receiving benefits under the Extended Disability Benefit.

REHABILITATION BENEFIT

"Rehabilitative Employment" means work in Any Occupation for which the Insured's training, education or experience will reasonably allow. The work must be approved by a Physician or a licensed or certified rehabilitation specialist approved by us. Rehabilitative Employment includes work performed while Partially Disabled, but does not include performing all the material duties of his/her Regular Occupation on a full-time basis.

If an Insured is receiving a Monthly Benefit because he/she is considered Totally Disabled under the terms of this Policy and is able to perform Rehabilitative Employment, we will continue to pay the Monthly Benefit less an amount equal to 50% of earnings received through such Rehabilitative Employment.

An Insured will be considered able to perform Rehabilitative Employment if a Physician or licensed or certified rehabilitation specialist approved by us determines that he/she can perform such employment. If an Insured refuses such Rehabilitative Employment, or has been performing Rehabilitative Employment and refuses to continue such employment, even though a Physician or licensed or certified rehabilitation specialist approved by us has determined that he/she is able to perform Rehabilitative Employment, the Monthly Benefit will be reduced by 50%, without regard to the Minimum Monthly Benefit.

RELIANCE STANDARD LIFE INSURANCE COMPANY

AMENDATORY RIDER

It is hereby understood and agreed that the Policy will be amended by the addition of the following:

Applicable to Vermont Residents Only

The following sections/provisions of this Policy are amended to comply with Vermont law:

1. **Schedule of Benefits section, Elimination Period provision.**

The Elimination Period will be the lesser of the number of days shown on the Schedule of Benefits in this policy or:

For Benefit Periods 2 years and greater: 365 days.

For Benefit Periods greater than 1 year but less than 2 years: 180 days.

2. **Limitations section, Mental or Nervous Disorders and/or Substance Abuse, if such limitations are included in this Policy.**

If this Policy contains limitations in coverage for mental or nervous disorders and/or substance abuse, such limitations will not apply to Vermont residents. Coverage for these conditions will be treated the same as other conditions that may entitle the Insured to full benefits.

3. **Limitations section, Pre-existing Conditions, if such limitation is included in this Policy.**

The pre-existing condition provision time period in the definition of Pre-existing Condition shall be the lesser of the time period shown on the Limitations form in this policy or twelve (12) months.

The period of time during which the Insured becomes Totally Disabled due to a Pre-existing Condition and a benefit is not payable for such Total Disability is the lesser of the time period as shown in this policy or twelve (12) months.

All other terms and conditions remain unchanged.

RELIANCE STANDARD LIFE INSURANCE COMPANY

A handwritten signature in black ink, appearing to read "Charles Denaro". The signature is fluid and cursive, with the first name "Charles" and last name "Denaro" clearly distinguishable.

Secretary

RELIANCE STANDARD LIFE INSURANCE COMPANY
2001 Market Street, Suite 1500
Philadelphia, PA 19103-7090
(267) 256-3500
Toll-free telephone number: 1-800-644-1103

**NOTICE CONCERNING POLICYHOLDER RIGHTS IN AN
INSOLVENCY UNDER THE MINNESOTA LIFE AND HEALTH
INSURANCE GUARANTY ASSOCIATION LAW**

If the insurer that issued your life, annuity, or health insurance policy becomes impaired or insolvent, you are entitled to compensation for your policy from the assets of that insurer. The amount you recover will depend on the financial condition of the insurer.

In addition, residents of Minnesota who purchase life insurance, annuities, or health insurance from insurance companies authorized to do business in Minnesota are protected, **SUBJECT TO LIMITS AND EXCLUSIONS**, in the event the insurer becomes financially impaired or insolvent. This protection is provided by the Minnesota Life and Health Insurance Guaranty Association.

Minnesota Life & Health Insurance Guaranty Association
4760 White Bear Parkway, Suite 101
White Bear lake, MN 55110
(651) 407-3149

The maximum amount the guaranty association will pay for all policies issued on one life by the same insurer is limited to \$500,000. Subject to this \$500,000 limit, the guaranty association will pay up to \$500,000 in life insurance death benefits, \$130,000 in net cash surrender and net cash withdrawal values for life insurance, \$500,000 in health insurance benefits, including any net cash surrender and net cash withdrawal values, \$250,000 in annuity net cash surrender and net cash withdrawal values, \$410,000 in present value of annuity benefits for annuities which are part of a structured settlement or for annuities in regard to which periodic annuity benefits, for a period of not less than the annuitant's lifetime or for a period certain of not less than ten years, have begun to be paid on or before the date of impairment or insolvency, or if no coverage limit has been specified for a covered policy or benefit, the coverage limit shall be \$500,000 in present value. Unallocated annuity contracts issued to retirement plans, other than defined benefit plans, established under section 401, 403(b) or 457 of the Internal Revenue Code of 1986, as amended through December 31, 1992, are covered up to \$250,000 in net cash surrender and net cash withdrawal values, for Minnesota residents covered by the plan provided, however, that the association shall not be responsible for more than \$10,000,000 in claims for all Minnesota residents covered by the plan. If total claims exceed \$10,000,000, the \$10,000,000 shall be prorated among all claimants. These are the maximum claim amounts. Coverage by the guaranty association is also subject to other substantial limitations and exclusions and requires continued residency in Minnesota. If your claim exceeds the guaranty association's limits, you may still recover a part or all of that amount from the proceeds of the liquidation of the insolvent insurer, if any exist. Funds to pay claims may not be immediately available. The guaranty association assesses insurers licensed to sell life and health insurance in Minnesota after the insolvency occurs. Claims are paid from this assessment.

THE COVERAGE PROVIDED BY THE GUARANTY ASSOCIATION IS NOT A SUBSTITUTE FOR USING CARE IN SELECTING INSURANCE COMPANIES THAT ARE WELL MANAGED AND FINANCIALLY STABLE. IN SELECTING AN INSURANCE COMPANY OR POLICY, YOU SHOULD NOT RELY ON COVERAGE BY THE GUARANTY ASSOCIATION.

THIS NOTICE IS REQUIRED BY MINNESOTA STATE LAW TO ADVISE POLICYHOLDERS OF LIFE, ANNUITY, OR HEALTH INSURANCE POLICIES OF THEIR RIGHTS IN THE EVENT THEIR INSURANCE CARRIER BECOMES FINANCIALLY INSOLVENT. THIS NOTICE IN NO WAY IMPLIES THAT THE COMPANY CURRENTLY HAS ANY TYPE OF FINANCIAL PROBLEMS. ALL LIFE, ANNUITY, AND HEALTH INSURANCE POLICIES ARE REQUIRED TO PROVIDE THIS NOTICE.